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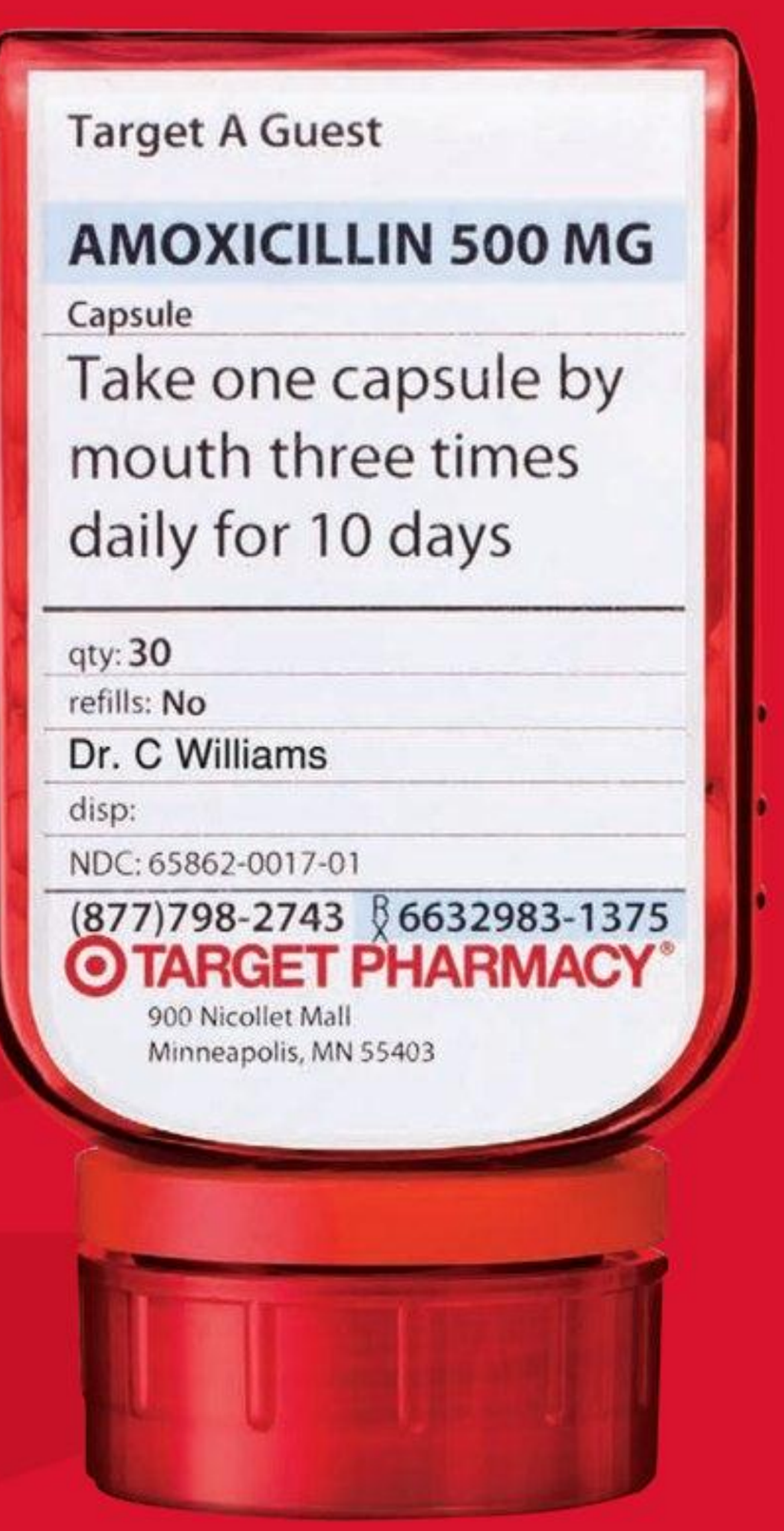

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october 1

124 comfort desserts

A soul-soothing pie, crumble, tart and more. Take your pick from our favorite apple treats.

on the cover

26 Halloween Decorating Ideas
40 Why Kids Today Are So Mean
90 The Anti-Cancer Diet
100 Favorite Family Suppers
120 Bacon Mac & Cheese

Cover Photograph by Rita Maas
Food Styling by Anne Disrude
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for Leslie Siegel

in every issue

6 FROM THE EDITOR
10 FEEDBACK
13 INNER CIRCLE
130 BUYER'S GUIDE
132 MY FAMILY LIFE

home

24 HOME NEWS
26 TRICK OR TREAT

A Halloween celebration calls for eerie decorations, like bewitching silver pumpkins and a wickedly elegant wreath.

october 1

family

36 FAMILY TIME

38 MY HOMETOWN

40 TOO CRUEL FOR SCHOOL Bullying among students has reached epidemic proportions, and it's taking a heavy toll on our kids. Learn why parents must be part of the solution.

style

52 STYLE NEWS

54 THINK PINK Stylish finds that help fight breast cancer—treat yourself and be part of the cure.

58 LET IT SHINE Treatments, tools and tricks to get healthy, lustrous hair.

health

70 HEALTH NEWS

72 KIDS' HEALTH

74 WALK IT OFF

81 NOW WHAT? The next steps to take after a breast cancer diagnosis.

90 THE ANTI-CANCER DIET Keep the whole family healthy by adding these superfoods to your shopping list.

food

94 FOOD NEWS

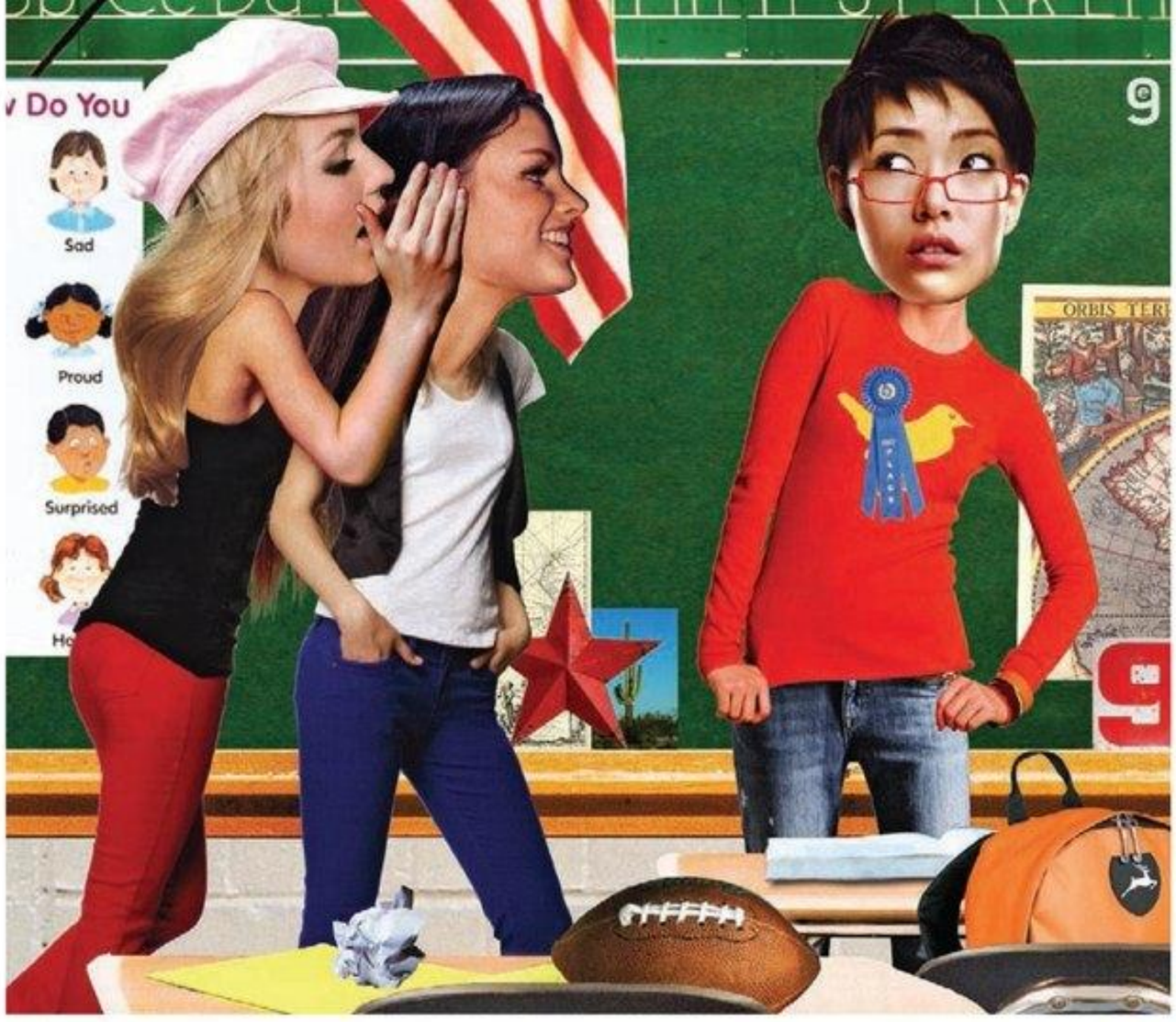
96 IN THE KITCHEN WITH REGINA

100 WOK & ROLL Our healthy, homemade versions of Chinese takeout really deliver.

114 MACARONI AND CHEESE The only thing better than one fantastic recipe? Five of them.

124 COMFORT DESSERTS A soul-soothing pie, crumble, tart and more—take your pick from our favorite apple treats.

127 SLOW COOKER SUPPERS



40

58→

24

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from the editor

There have always been schoolyard bullies, "mean girls" (who doesn't remember 7th grade?) and elitist popular kids who put a premium on making everyone else feel uncool. And despite the recent publicized cases of extreme bullying, I don't believe that tweens and teens today are inherently nastier than they were when I was a kid. What *has* changed is technology, which makes it so much simpler for children to be cruel. According to Gary Small, a neuroscientist at UCLA, "The time young people spend engaged with technology is time not spent playing on the playground, or learning verbal cues and face-to-face skills, like maintaining eye contact. Those are all things that could help reduce the surge in school bullying." In our special report "Too Cruel for School" you'll not only learn how you can teach your kids (or grandkids) strategies for dealing with bullies, but you'll also find out about prevention programs that many school systems are adopting. In fact, 43 states now have laws against bullying—whether it occurs in the classrooms or hallways. But in the end the most important step toward controlling the problem is for parents to become a bigger part of the solution.

Technology is playing a major role in bullying. Find out why on page 40.

Linda Fears, Editor in Chief
linda@familycircle.com

family night in

NOV. 6

» To help families spend more meaningful time together, *Family Circle* has declared November 6 the kickoff date for the first annual Family Night In. Upcoming issues will announce an exciting contest and offer great tips to guarantee your Family Night In will soon become a special tradition. So mark your calendar—you won't want to miss it!

Photos: (Fears) Steven DeCanio. Hair: Rosa Miranda for Christo Fifth Avenue Salon. Makeup: Sue Pike for Sally Harlor. Styling: Kelly Mealia for Kreative Kouture & Co. Shirt: Theory. Jeans: Citizens of Humanity. Necklace: Marit Rae Jewelry. Earrings: Anthropologie. Ring & Watch: Her own. (Family) Mark Douet/Getty Images.

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hallie burton

When she moved from her native Australia to the U.S. five years ago, Hallie had zero experience celebrating Halloween. "Usually we just throw a costume on our dog and take her for a walk," says the photographer who shot **Trick or Treat,** page 26. Inspired by our story, she's stepping things up this year with a carved pumpkin and candy.

peg tyre

Parents shouldn't rely on teachers and administrators to deal with bullying, says Peg, the mom of two who wrote **Too Cruel for School,** page 40. Give kids time and space to try to figure out boundaries on their own, suggests the author of *The Trouble with Boys* (Crown). "But don't be afraid to get involved if you suspect they're being picked on."

megan schlow

The six authentic dishes in **Wok and Roll,** page 100, reminded Megan of family dinners growing up. "My mom taught Chinese cooking classes when I was young, so preparing Asian cuisine is definitely in my blood," says the Manhattan-based food stylist. "Not surprisingly, I'm famous among my friends for homemade dumplings."

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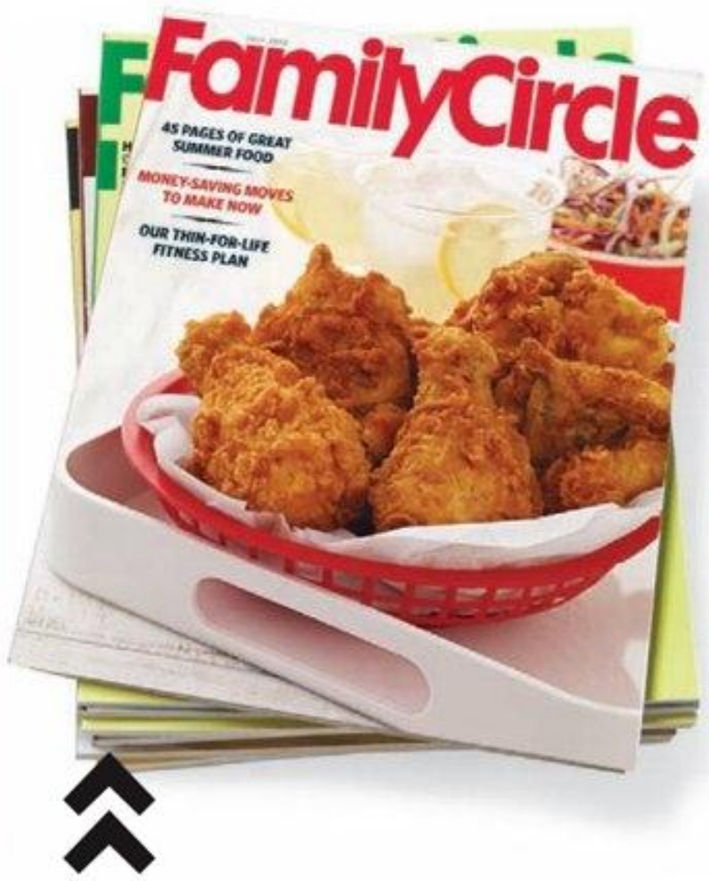

I immediately bought the July issue when I saw the fried chicken on the cover—and then I went right back into the store for the ingredients. My family loved it! If they have their way, we'll definitely be eating it often. Thank you for such a wonderful recipe.

Stacy Kesser, TONAWANDA, NY
Visit familycircle.com/friedchicken for this delicious recipe.

Get Carded

Thanks for recommending Cardstore.com in your Inner Circle column [June]. I'd been searching for a great place to get business cards, and after checking out the site I ordered a set right away.

Anne Bruce, via Facebook

Lesson Plans

My children are still young, but as a high school teacher I work with teens all day. I recently signed up for Momster.com and I've enjoyed reading about the issues kids are facing today and the methods parents are using to handle them. I know that I'll have better communication with my students in the fall because of the site, and I'll be recommending it to other faculty members and families.

Tina Bairstow, GURNEE, IL

Coming of Age

I'm a 23-year-old college graduate, and I subscribe to *Family Circle*. While I'm not married and don't have kids yet, I absolutely love your magazine because of all its great tips and advice. I always look forward to receiving my issue in the mail.

Morgan Howard, COLUMBUS, OH

online this month

» Find simple, no-carve pumpkin-decorating ideas at familycircle.com/paintedpumpkins

» Got some pounds to shed? Our FREE 12-week Walk Off the Weight newsletter is packed with healthy recipes, get-you-going playlists and an easy exercise plan. Sign up at familycircle.com/walkofftheweight

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INNER CIRCLE

A roundup of smart talk, hot trends and favorite finds

Go On, Have a Ball

Move over, cupcakes. Bite-size cake balls are the latest dessert craze. We're talking serious sugar here—cake crumbs and frosting mixed together, rolled into balls, then dipped in icing, melted candy or chocolate. Put 'em on a stick, and you've got a magical little concoction that's a combo doughnut hole, truffle and lollipop. Supposedly an old southern treat, cake balls can now be found in upscale bakeries and gift catalogs, and blogger Bakerella's *Cake Pops* (Chronicle) will hit bookstores in time for the holidays. These treats are the perfect way to satisfy your sweet tooth without scarfing down a slab of layer cake. But we bet you can't eat just one.

>> Want to roll your own? Go to familycircle.com/cakesicles for a recipe.

TRASH TALK

Word on the street is that this chair is garbage. Literally. As in, this kitchen-worthy find used to be 111 plastic Coca-Cola bottles, which were crushed, melted, then molded into this chic (dare we say refreshing?) seat. No word on whether chairs made from Diet Coke bottles are a little slimmer. 111 Navy chair, $230, dwr.com

Photos (cakesicles): James Baigrie. Food styling: Karen Tack.

CLUB SCENE

Before there were food processors and graters and zesters and all the other modern-day gadgets, there must have been something like the Homo Sapiens Caveman Kitchen Tool. This all-purpose utensil, made of sandstone, can be used to grind herbs, grate ginger, sharpen knives, even pound meat. Something tells us Wilma Flintstone would be all over this. Thinkgeek.com, $40

CASE CLOSED

After 20 seasons in prime time, the gavel finally came down.

The original *Law & Order* series ran out of appeals last May, but in this courtroom, the verdict is in: Jack Bauer's last stand on *24* and the *Lost* time travelers robbed Dick Wolf's crew of due-process props. Over the past two decades the thought-provoking prosecutorial procedural collared many a star for a guest appearance. Can you recall who played whom?

1. Julia Roberts	A. Shooter of two men on NYC subway
2. Allison Janney	B. Drug dealer accused of rape
3. Lauren Graham	C. Witness against the Russian mob
4. Julianna Margulies	D. Mistress of a police detective
5. Samuel L. Jackson	E. Movie studio executive in Hollywood
6. Cynthia Nixon	F. Lawyer for a drug dealer
7. Jennifer Garner	G. Pro fundraiser with evidence in a high-profile murder
8. Philip Seymour Hoffman	H. Lieutenant investigating the death of a female naval officer

ANSWERS 1. G, 2. C, 3. E, 4. H, 5. F, 6. A, 7. D, 8. B

YOUR SCORE

10 » Chief Justice

9 » District Attorney

8 » Detective

7 » Beat cop

6 or fewer » Perp

EXTRA CREDIT

Which *Grey's Anatomy* star appeared on *L&O* twice, in different roles?

A. Kate Walsh B. Ellen Pompeo C. Chandra Wilson D. Sandra Oh

ANSWER: B. Ellen Pompeo, in 1996 and 2000

Which current *30 Rock* star has an official *L&O* story credit?

A. Tina Fey B. Tracy Morgan C. Alec Baldwin D. Jane Krakowski

ANSWER: C. Alec Baldwin, for a 1998 episode about the murder of a journalist

Split Decision A British law firm recently claimed Facebook was implicated in 1 out of 5 divorce cases. Guess we'd better unfriend our partner—pronto.

Photos: (Roberts) AFP/Getty Images; (Janney) Walter McBride/Retna Ltd.; (Graham) FilmMagic/Getty Images; (Margulies) Getty Images; (Jackson, Nixon) RD/Kirkland/Retna Ltd./Corbis; (Garner) RD/Kennedy/Retna Ltd./Corbis; (Hoffman) Dziekan/Retna Ltd./Corbis.

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QUESTIONS & ANSWERS

Fact: Kids Really Are More Obnoxious These Days.

Melvin Konner, a biological anthropologist at Emory University and author of The Evolution of Childhood *(Harvard University Press), decodes the mystery of adolescence.*

Why are my teens driving me insane? Testosterone surges in boys and girls facilitate aggression and sexuality, turning them from children into something not quite adult. The problem is that while puberty typically takes place somewhere around age 12 or 13, their frontal lobes, which are linked to impulse control and decision-making, are still immature. No wonder they're such a pain.

Are boys worse? Brain-wise, they develop slower. At age 7 or 8 they're a year behind girls, and at puberty about two years behind. The disconnect is bigger, so they're more of a headache.

What's behind the extreme mood swings? The big news is how much the brain grows after puberty until about age 20, especially the region that monitors and interprets emotions. For teens, just looking in the mirror and seeing the changes in their bodies can be overwhelming. The intensity of the struggle to control feelings is far greater than we thought even 10, 20 years ago.

So we should give them a pass? We promise to take care of them no matter what, then one day start telling them they'll have to leave the nest. Kids figure they might as well reject us first, hence all the rebellion and risk-taking. Consider them less guilty by reason of adolescence.

We can read all about this in your book, right? Then again, it's 700-plus pages. You sound like a teenager. But similar to a fruitcake, it makes a great doorstop.

Photo: Heide Benser/Corbis.

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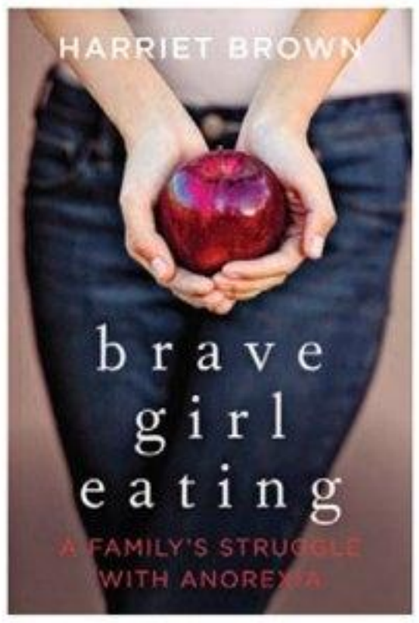
WHINE ON

Get ready to grumble! Grousing out loud is good for your health. Karla McLaren, author of *The Language of Emotions* (Sounds True, Inc.), calls it "conscious complaining," and says venting helps you pinpoint problems so you can solve them and move on. She also suggests doing it alone because 1) people don't want to hear it, and 2) their meddling would mess up the process. We know no one likes a whiner, but where's the fun in that?

LIT CRIT

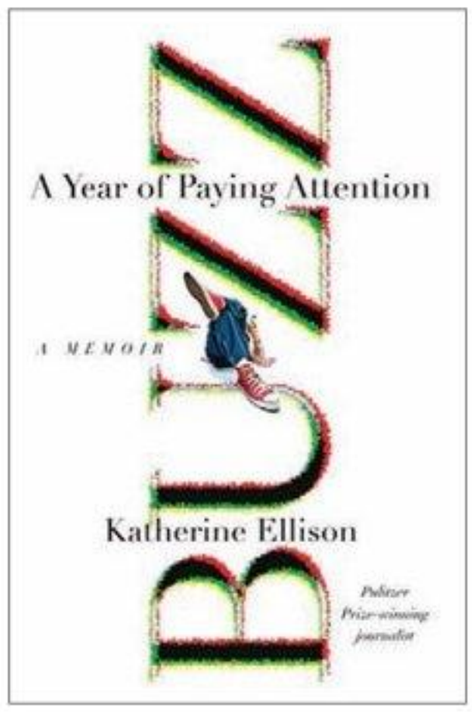
YEARS OF LIVING DANGEROUSLY

Part of the allure of a memoir is the vicarious thrill of experiencing someone else's life—with a shot of schadenfreude. These two books movingly embrace the heroics, and humor, of moms surviving the emotional upheaval of teens in crisis.



BRAVE GIRL EATING, by Harriet Brown (William Morrow). One night Harriet Brown's painfully thin 14-year-old, Kitty, stands beside her bed and, in a panic, announces, "My heart feels funny." The rush to the ER and subsequent hospital stay was also a wake-up call. From then on, the kitchen table becomes a battlefield as Harriet and her husband take over treating Kitty's eating disorder, with forced feedings as the cure. At times angry, often anguished and always on the verge of heartbreak, Harriet manages to nurse her daughter back to a hard-won but tenuous state of health. Riveting, eloquent, achingly honest.

BUZZ: A YEAR OF PAYING ATTENTION, by Katherine Ellison (Voice). With a ferociousness that befits her Pulitzer Prize–winning reporting skills, Katherine Ellison devotes a year to "paying attention to attention" as she grapples with her son's ADHD. Still, Buzz—she calls him that for the way he often makes her feel—has mastered the art of nearly driving her over the edge: He once called 911 because she took away his Gameboy. But in this fascinating, funny and insightful study of living with ADHD, Katherine's exasperation morphs into bemused acceptance of her challenging, charming child.



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At last, pork barrel spending isn't just for politicians—J&D's Mmmvelopes (mmmvelopes.com, $7/25) envelopes look and smell exactly like bacon, and taste like it when licked. Imitation flavoring does the trick in the adhesive, making for a guilt-free pig-out, says J&D cofounder Dave Lefkow. A compelling argument against e-mail, in our book.

MOMster POLL RESULTS

How many times a day do you think your kid logs on to a social network, such as Facebook, Formspring or MySpace?

20%	ONCE, AT MOST TWICE
26%	SEVERAL—BEFORE AND AFTER SCHOOL, AND ONCE MORE BEFORE BED
23%	A BUNCH—MORE OR LESS HOURLY WHEN SHE'S AWAKE
31%	NONE—SHE'S NOT ALLOWED TO GO ON SOCIAL NETWORKS

Illustration: Derek Yaniger.

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Switch from a morning to an evening shower.
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Bathe with lukewarm water.
Hot water can actually strip away moisture from the skin.

Pat skin dry with a *Better Homes and Gardens* towel. Be careful not to rub, which will irritate skin and may cause you to scrub away important moisture-retaining lipids.

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HOME

→ DO-IT-YOURSELF IDEAS → DECORATING STRATEGIES → FAVORITE FINDS

Prop styling: Scott Horne.

Gold Standard

Give a room the royal treatment with a few gilded accents. "While this color evokes grandeur, it can also be welcoming," says designer Cecilie Starin. For a modern spin, choose pieces with a bright sheen—and unless your style icon is Donald Trump, use the hue sparingly. Four Calling Birds mug ($40/4), Dauphine candlestick ($80/2), rosannainc.com. Sequin pillow, kohls.com, $50. Golden Fig vases, blisslivinghome.com, $58/3. Etched-dot flute, pier1.com, $7. Pretty Mum wallpaper, ballarddesigns.com, $59/double roll.

PHOTOGRAPHY BY **KATE MATHIS**

→ BY KATE DOHERTY

Mercury glass lithograph apothecary jar, Two's Company, $110/5

Glitter skull, zgallerie.com, $10

Skeleton matches, Two's Company, $8.50 each

Melamine skull dinner plate, target.com, $2

Battery-operated candles, potterybarnkids.com, from $8

FamilyCircle.com
For more spooky accessories, go to **familycircle.com/halloweendecor**

HAUNTED HOUSE

A few frightfully fun frills to get you in the spirit.

Jazz up a neutral palette with a few key accessories in unexpected, zingy colors.

PRO pointers

In her new book, *Casual Living* (Ryland Peters & Small), stylist **Judith Wilson** makes a case for relaxed decor. She shares her tips for creating a warm and orderly family home.

NAVIGATION PLAN →
Set up the layout of your furniture so the space is easy to move around in.

PLAY TIME →
Keep rooms simple, but have fun. Try propping art against the wall instead of hanging it, or tuck snapshots into the corner of a mirror.

TIDY TOOLS →
Cut down on chaos by stocking every room with a big basket for stashing shoes, magazines and other clutter culprits.

Photos: (candles, matches, jar) Peter Ardito; (plate) Bryan McCay.

GO GREEN SAVE $

Each year millions of printer cartridges end up in landfills. Participating Walgreens stores will refill used ink cartridges for about half the cost of a new one—visit walgreens.com to find your nearest location.

SEE BUYER'S GUIDE, PAGE 130

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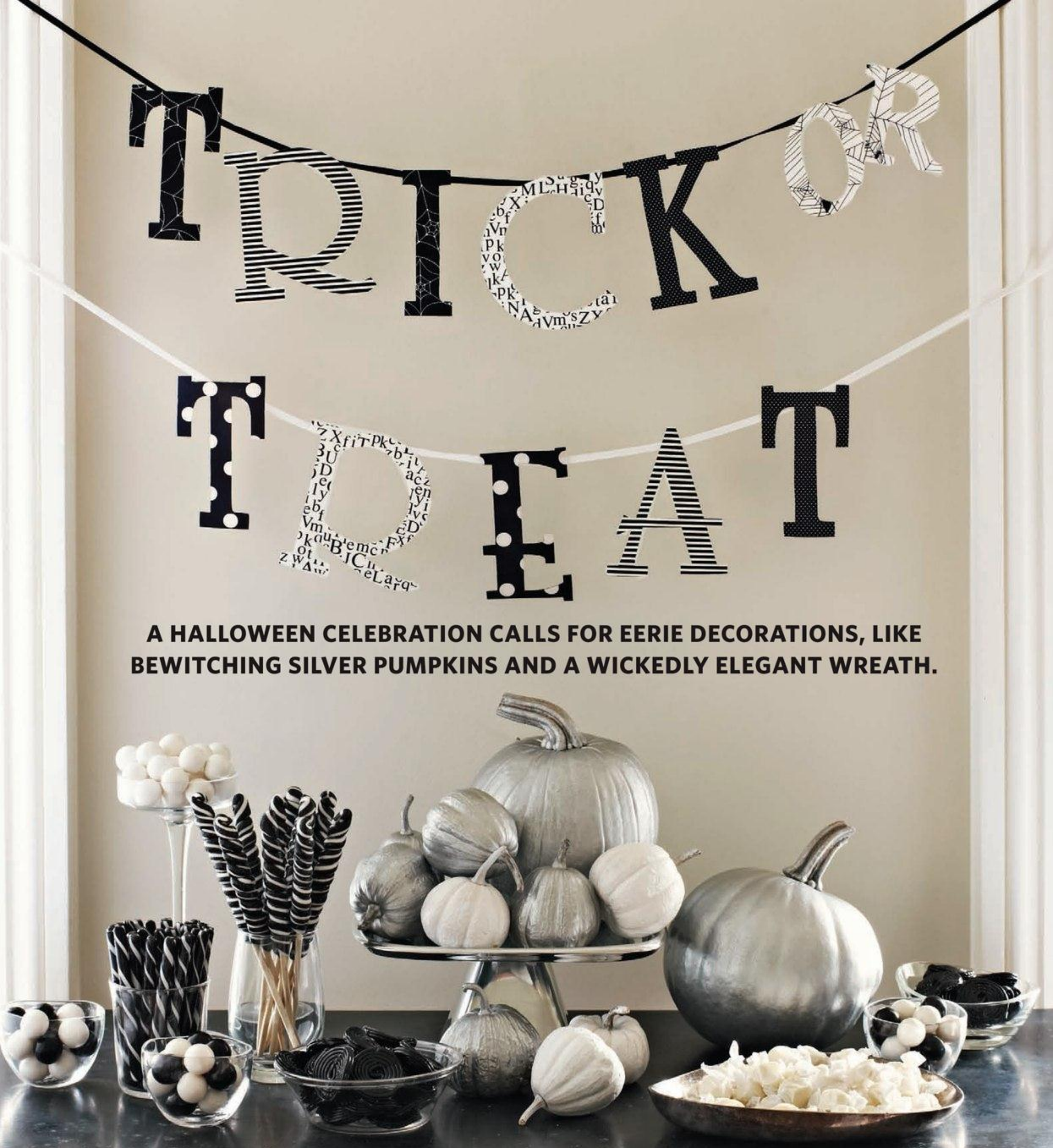

A HALLOWEEN CELEBRATION CALLS FOR EERIE DECORATIONS, LIKE BEWITCHING SILVER PUMPKINS AND A WICKEDLY ELEGANT WREATH.

CRAFT STYLING BY
Suzonne Stirling

PHOTOGRAPHY BY
Hallie Burton

TEXT BY
Judy Prouty

Find more issues at
magazinesdownload.com

SWEET TALK A festive banner hangs above a sideboard tableau mixing luminous pumpkins with bowls of gum balls, licorice wheels, saltwater taffy and other devilishly delicious treats. **HERE'S HOW** To make a sign template, choose a fun font from your computer (or mix several), enlarge (try 550 to 600 point size), print and cut out. Peel backing from one side of double-side adhesive sheets and attach to card stock. Cut strips of black and white fabric and place on the reverse side of the adhesive sheets. Place a letter cutout on the fabric-covered card stock. Trace and cut out the letter. Repeat process for each letter. Glue small loops of velvet ribbon onto the back of each letter. Thread a long piece of velvet ribbon through the loops and hang above a table or doorway. For silver pumpkins, use several coats of metallic floral spray until completely covered.
Assorted black and white candy, bulkcandystore.com.

BLACK BEAUTIES The mood darkens at the sight of a somber wreath and an arrangement of ebony-painted plates and bowls. **HERE'S HOW** For the wreath, remove stems from fabric flowers (dark colors work best). Glue the base of each onto a styrofoam wreath form until densely covered with flowers, all over. Using several light coats, spray the wreath with matte black floral spray paint. For the black dishes: Spray-paint inexpensive thrift shop dishes with two coats of satin finish black paint. Let dry thoroughly.

CREATE A MACABRE STILL LIFE ON A TABLE OR SHELF WITH A ROGUES' GALLERY OF FAVORITES, INCLUDING SPIDERS AND SKULLS.

Consider yourself crafty? Get ideas and tips from other creative moms at **momster.com/fc/crafts**

EAT, DRINK AND BE SCARY A table runner embellished with critters sets the scene for fright night entertaining. **HERE'S HOW** Cut white felt to fit the table's length (add 12 inches for overhang on each side) and width (ours is 18 inches). Glue strips of rickrack in equally spaced sections, and around the edge of the runner. Enlarge Halloween clip art, then print and cut out. Trace cutouts on black felt, cut out and glue onto the runner as desired. For the pumpkin: Draw circles with a grease pencil, varying the pattern. Drill holes using different size bits. Cut a 3-inch round in the bottom of the pumpkin for a votive. TIP: Use wool felt, not craft felt, for the runner because it's more durable and gives a crisp edge.

Pumpkin carving: Marissa Corwin.

Find more issues at magazinesdownload.com

ILLUMINATING IDEA Paper lanterns featuring images of skeletons and skulls cast a bone-chilling glow on a mantel or table.

HERE'S HOW Enlarge clip art of skeletons, skulls or bugs to desired size, and print onto vellum sheets. Cut four pieces of heavy black card stock to the desired height and cut "windows" in each piece of the card stock. Trim the vellum printout windows and tape to the back side of the card stock. Punch decorative holes into the top edge of the card stock, if desired. Fold card stock vertically, one fold on each side of the clip art image. Cut another piece of card stock to the same size as the folded piece. Tape it to the folded piece and place a battery-operated light or votive candle inside the lanterns. TIP: To make a fancy edge around the windows (see skeleton lantern), use an edge puncher on strips of card stock and attach around the edges of the vellum with glue.

LOOKING FOR A CREEPY DISPLAY? BUGS ARE ALWAYS A GOOD BET, OR TRY BLACK CATS AND OWLS.

CRAWL SPACE Insects in black frames send a menacing message yet are graphically refined enough to grace a wall after the party's over.

HERE'S HOW Download clip art for the background (we looked for old postcards and medicine labels). Resize image to fit the frame, and print onto card stock. Download clip art of bugs. Resize as desired and print onto vellum sheets. Place the vellum sheets over the printed background and into black frames.

For two more great Halloween decorating ideas, go to familycircle.com/trickortreat

Prop styling: Christina Lane.

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ON THE FENCE Dream up a haunted corner in your house with a rickety wrought-iron fence for goblins and spooky crows. **HERE'S HOW** Enlarge clip art of crows and moon (or owls and bats) to the desired size. Print and cut out. Position clip art on construction paper. Trace and cut out. To make the fence, cut long strips of black construction paper and an arrow shape for the tip of each post. For pumpkin faces, cut out eyes, mouth, nose and eyebrows from black construction paper. Arrange the cutouts on the pumpkin to make a face and glue on. TIP: To avoid damaging your walls, attach silhouettes using removable double-side tape or temporary adhesive.

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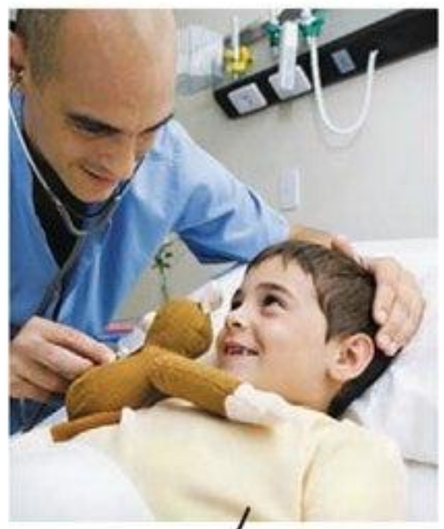

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FAMILY

→ NEWS → VIEWS → FUN ACTIVITIES THAT KEEP YOU CONNECTED

Photo: Yellow Dog Productions/Getty Images.

School Daze

Class is back in session—along with dance recitals, soccer practice and orchestra rehearsals—but don't let the chaos of the new school year take away those unexpected family moments. Keep the halcyon days of summer alive by hanging out in the great outdoors with your kids. Whether you're tossing around a Frisbee or just enjoying a stroll, the fresh air will give you all a break from the everyday, and quality time together.

FAMILY TIME

→ BY CELIA SHATZMAN

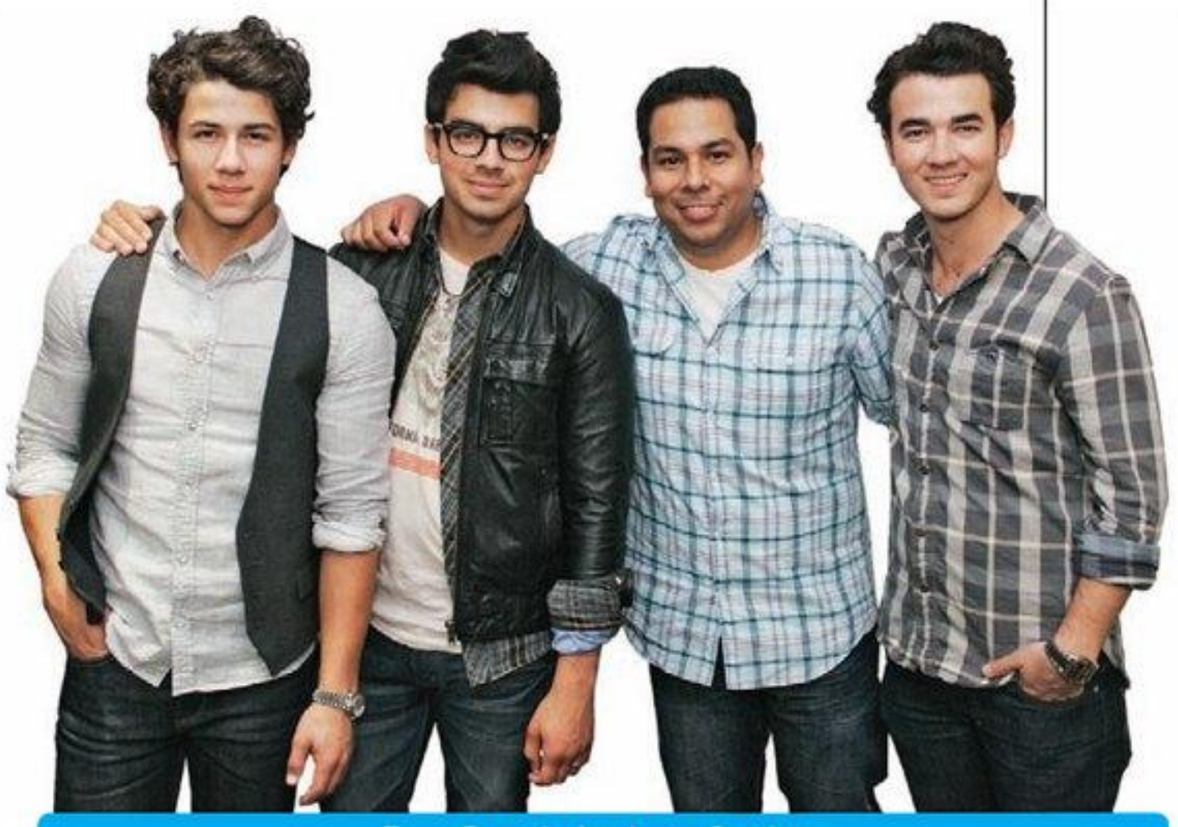
Teen Beat

Miley, Justin and Miranda rule teen talk—but how much do you really know about the latest icons? FC chats with Radio Disney DJ and dad of three Ernest "Ernie D." Martinez, who interviews up-and-coming artists and actors weekday afternoons.

Q: When you were a teenager, who was your celebrity idol?
A: I didn't really look up to movie or music stars. I admired athletes and wanted to be like Michael Jordan—the one who could always be counted on to win the game for the team at the last minute.

Q: You've met everybody from Ashley Tisdale to Selena Gomez. What's the funniest encounter you've had with a celebrity?
A: The first time I was going to interview Justin Bieber, I took it upon myself to create a rap to incorporate into his single "One Time." We listened to it together on-air and he couldn't stop laughing.

Q: Which current CD should parents add to their must-own list?
A: The soundtrack to *Camp Rock 2: The Final Jam*. There are slow songs, up-tempo pop tunes, romantic music, even hip-hop—something for everybody.



Ernie D. with the Jonas Brothers

Q: What music are your kids listening to right now?
A: My 4-year-old is a bit young, and my 10-year-old daughter, Katie, considers herself a tomboy, though I still catch her watching Demi Lovato music videos. Abby, 15, loves the new group Allstar Weekend, whose debut album came out in June.

Q: How do you keep up with teens' pop cultural interests?
A: It's really hard. I get a lot of tips about what's going to be popular from my kids. And I find new talent to feature on my shows through Radio Disney's *N.B.T. (Next Big Thing)* program, which spotlights young, unsigned artists.

Hear Ernie D.'s programs online at radiodisney.com. Or log on to find Radio Disney on an AM station near you.

CENTER STAGE

The Great White Way isn't the only place to catch Broadway hits. Tony Award–winning shows like *Hair, Shrek the Musical* and *In the Heights* are touring the country now. Find one near you at broadwayacrossamerica.com.

MOVIE OF THE MONTH

Waiting for "Superman"

From Davis Guggenheim, the Academy Award–winning director of *An Inconvenient Truth,* comes an in-depth look at America's ailing public schools. Following five families as they pursue a better education for their kids, this documentary brings to life the stark statistics behind the broken system. (September 24)

» Log on to **waitingforsuperman.com** and pledge to see the film. Your click makes a difference, since sponsors will contribute to academic initiatives based on participation. For example, First Book will give 250,000 books to schools nationwide after 50,000 pledges are made. *—Megan Bingham*

[FC STAT]

71

percent of college admissions officers have received a Facebook or MySpace friend request from an applicant.

(Source: Kaplan, September 2009)

Photos: (Martinez) © 2009 Disney Enterprises, Inc.; (Martinez with Jonas Brothers) © 2010 Disney Enterprises, Inc.; (Waiting for Superman) Courtesy of Paramount Pictures.

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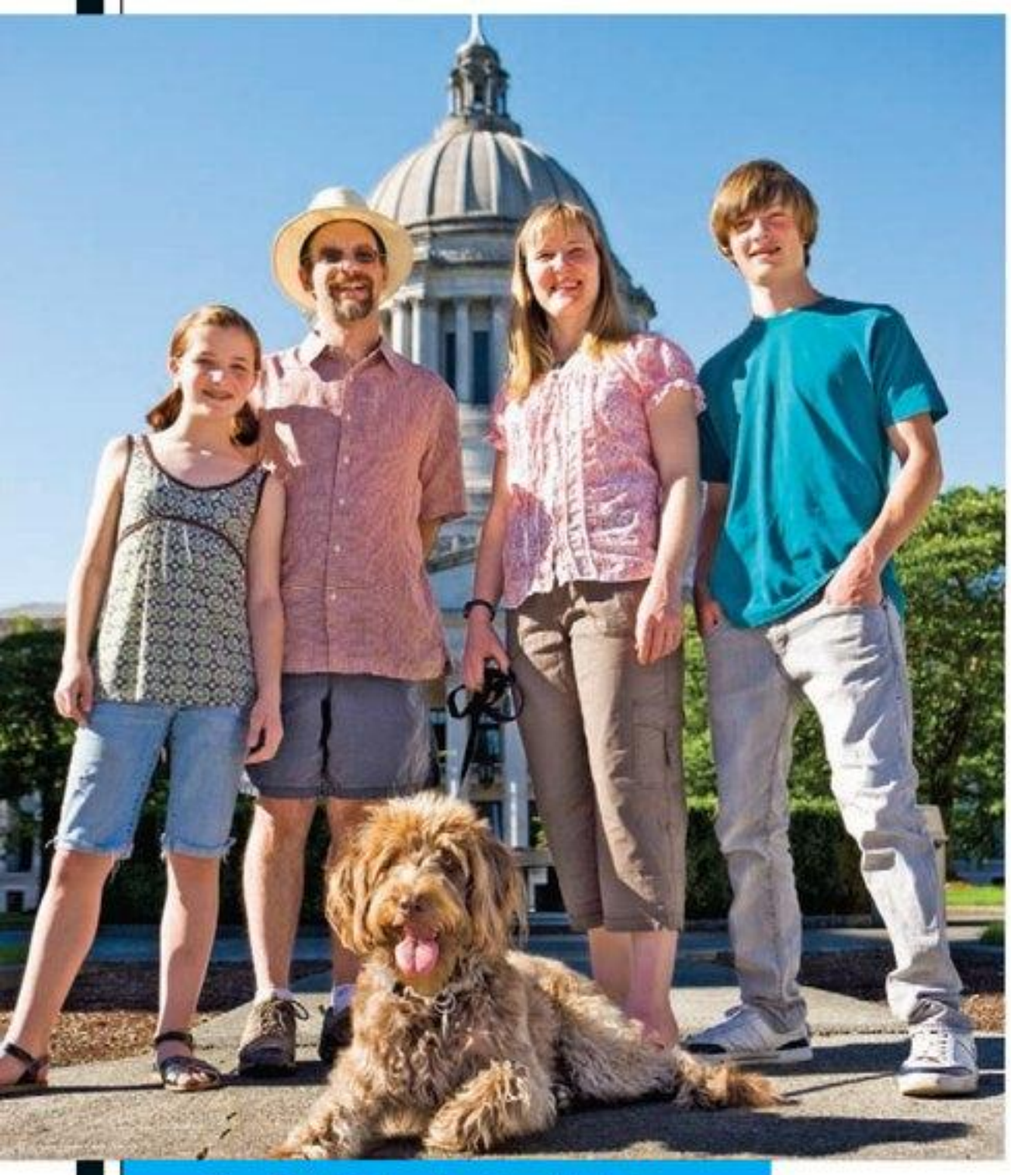
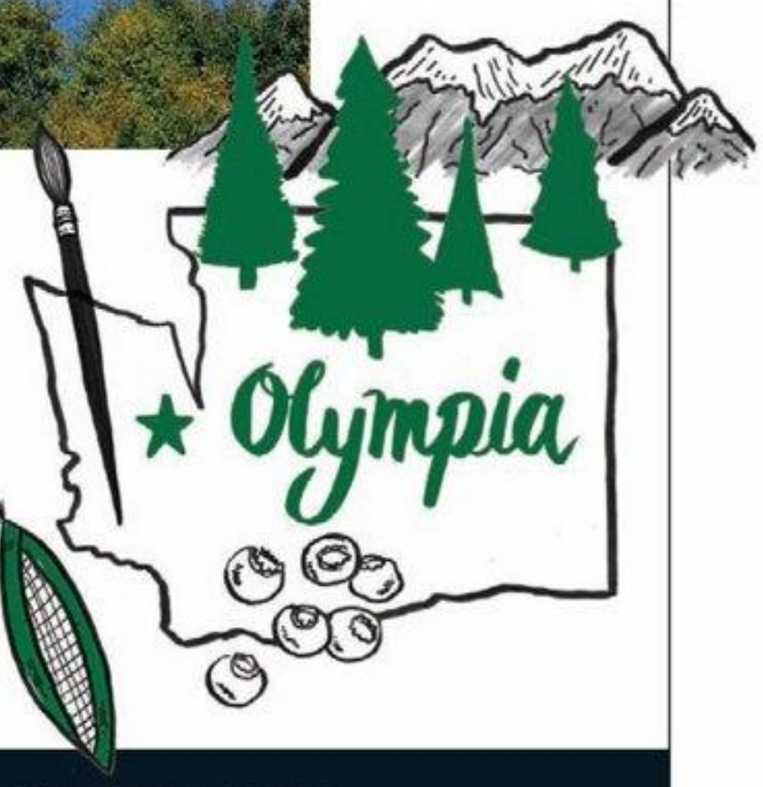
→ BY KRISTA MEYERHOFF



The Poultridge family: Madeline, 12; Andrew; Noelle Nordstrom; Abe, 15; and their dog, Wanda.

The Olympia skyline

Chambers Block



POPULATION: 46,890

CLAIM TO FAME: Washington State's 82-year-old Legislative Building boasts a 287-foot-high masonry dome, the fourth tallest in the world.

Olympia, WA

When Andrew Poultridge arrived in this capital city he was instantly attracted to the bustling arts scene and community spirit. Two decades later he's passed on his passion to his kids.

I was raised an hour north in Bellevue and moved here 24 years ago to attend college, where Noelle and I met. When I was a kid my family would stop in Olympia on our way to the beach. We liked to tour the **Washington State Capitol** campus, where the Supreme Court and elected officials have offices. There's also the **Governor's Mansion,** which has unbelievable views of Puget Sound and the Olympic Mountains.

Our downtown is historic and several of its buildings, like those on **Chambers Block,** date back to the 1880s. At Sherburne Antiques & Fine Art I browse old maps of the area from the 19th century. The kids stop in **Matter Gallery** to check out one-of-a-kind sculptures made from recycled materials like bowling balls, pencil erasers and bottle caps.

Abe's a budding artist and his talent hasn't gone unnoticed. Last fall the owner of **Eastside Big Tom,** a drive-thru burger joint, saw his work on a nearby building and asked Abe and his friend to decorate a wall next to the seating area. The boys spent three weeks painting and the result was a mural featuring space cats and a hungry alien—strange-sounding but hilarious!

We go to **Olympia Farmers Market** weekly, except in the winter, when it isn't open. It's the second largest in the state next to Seattle's Pike Place Market. Nearly 115 vendors sell everything from fresh-caught oysters to handmade soaps to gourmet roasted nuts. In the summer we wander the booths filling our bags with local corn and all types of berries.

During the free biannual **Arts Walk**, downtown businesses display student-made and professional pieces—both of our kids' work has been featured—while dancers take to the streets. The festival honors Earth Day with Procession of the Species, a parade where thousands march in nature- and animal-themed masks and costumes. Last year Noelle and Madeline joined a percussion troupe while Abe and I admired from the sidelines.

A day in the city is exciting but our favorite place to hang out is at home. Family night is often spent around the table in a competitive round of Scrabble. My grandmother taught me how to play and now my mom is showing our kids the tricks of the game. Even though Abe usually beats us, it's thrilling to see the tradition passed along. ●

Think your town is unique? Let us know why we should profile it—and your family—in an upcoming issue. Send us an e-mail and family photo to **hometown@familycircle.com**.

Photo (Olympia skyline): istock photo. Illustration: Joel Holland.

PHOTOGRAPHY BY **SCOTT AREMAN**

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ILLUSTRATIONS BY EDDIE GUY

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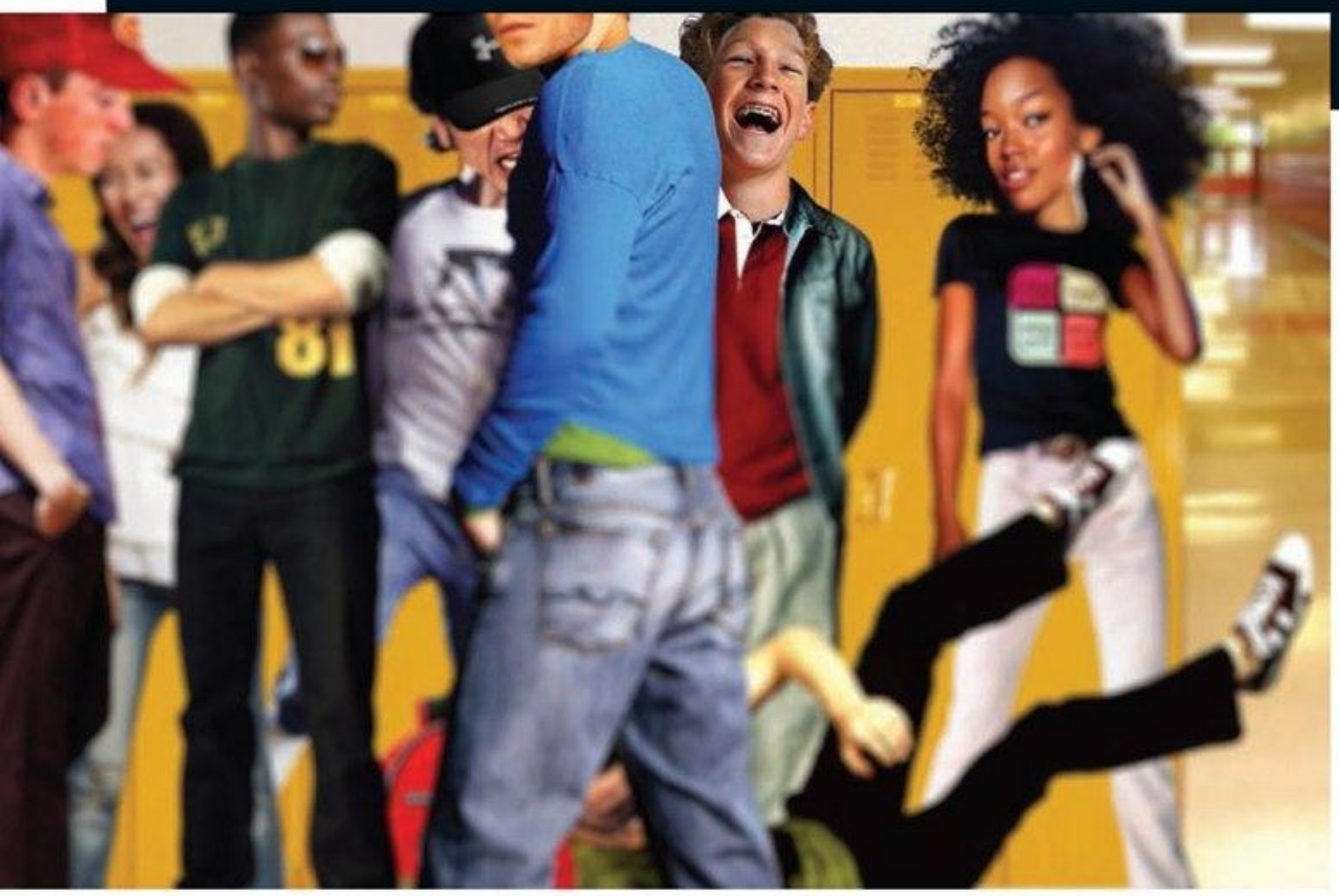
TOO CRUEL FOR SCHOOL

Intimidation, harassment, threats, abuse—bullying among students has reached epidemic proportions, and it's taking a heavy toll on our kids. Learn what's behind the surge and why parents must be part of the solution. By Peg Tyre

When Jill Jones sent her 10-year-old, Kacey, off to school in Lewisboro, New York, she knew it was a big day for her little girl. A reserved, self-conscious child, Kacey was wearing new white capri pants she'd insisted her mother buy. All went well until lunchtime, when the fifth-grader sat at a table with some popular girls. "Kacey knew them and liked them but didn't feel like she was in their inner circle," says Jill, 51. Things didn't go as Kacey had hoped. The girls were openly hostile; then, suddenly, one of them dumped ketchup on her lap. When Kacey, already thoroughly humiliated, jumped up and tried to wipe it off, the girls laughed and mocked her for "getting her period."

As soon as Kacey came home, recalls Jill, "I knew something was wrong, but she didn't want to talk about it." After a few probing questions, the whole story spilled out. "When I realized Kacey had been bullied, I was furious," says Jill, "Then I wondered if I was overreacting. But when I saw how traumatized Kacey was, I knew the

Research suggests that the growing frequency and intensity of bullying these days may be the result of a troubling decline in social skills among adolescents.



incident had crossed the line." Jill realized she needed to take action. "I had to find the best way to intervene so it wouldn't happen again," she says.

School bullying has many parents worried, and not just those whose kids have been on the receiving end. A series of shocking incidents has garnered headlines and provoked outrage and soul-searching in communities across the country. In Columbus, Indiana, a 13-year-old was charged with felony intimidation after he held a knife against a fellow student's throat in a classroom while the teacher's back was turned. In Yorktown, Virginia, 16-year-old Christian Taylor took his own life shortly after his mother, Alise Williams, complained to high school officials that her son had suffered months of relentless bullying by classmates, including one student who she says told Christian to "just go ahead and commit suicide and get it over with." And in South Hadley, Massachusetts, 15-year-old Phoebe Prince hung herself early this year after reportedly being tormented by classmates who called her "Irish whore" and "stupid slut" and sent cruel texts and messages—even after her death. Six teens are now facing charges in that case, ranging from harassment and stalking to violation of civil rights with bodily injury.

A Frightful Epidemic

Those cases have prompted parents and school officials to ask whether we're just seeing the tip of the iceberg, since bullying often takes place off the radar screen of grown-ups. While overall incidents of school violence, such as assault and theft, have declined in the last decade, bullying is on the rise. Just ask our kids. According to a 2009 federal survey of school crime and safety, 32% of middle and high school students said they'd been victimized during the academic year, compared with 14% in 2001. Among that group, 21% had been made fun of; 11% were pushed, tripped or spit on; and 6% were threatened.

But is any of that really worse than the verbal jabs, social slights and hard shoves today's parents endured while they were growing up? Most kids tease others and are teased from time to time; it's part of the harmless rough-and-tumble environment at all schools. Bullies, on the other hand, tend to target victims and subject them to repeated abuse. There is frequently a striking power imbalance between perpetrator and prey, whether it's a matter of age, size, academic achievement, popularity or economic status. This more virulent type of harassment has become all too common, according to experts.

"The amount of bullying in schools is unprecedented," says Marlene Snyder, Ph.D., director of development at the Olweus Bullying Prevention Program at Clemson University in South Carolina. "The public is becoming aware of how serious it can be."

Indeed, researchers have found that kids are particularly sensitive to intimidation and emotional cruelty. It makes them feel more fearful and anxious than if they were the victims of theft or a physical attack. And the suffering goes far beyond momentary humiliation. They are more likely to be distracted from learning, get poorer grades and become victims of violent crime. "They feel powerless," says Snyder, "and lose faith in the ability of adults to help them."

Legislators are recognizing that schools and communities need help to deal more effectively with the problem. Last spring Massachusetts Governor Deval Patrick signed a bill that requires teachers to report incidents of bullying, and principals to investigate them. Forty-three other states now have laws against bullying and student-to-student intimidation, whether it takes place in the classroom or hallway, or on the playing field. The Department of Education recently unveiled the Safe and Supportive Schools grants, a $27 million discretionary fund for states to use to create in-school programs to prevent harassment and violence. Parents also need to be part of the solution. Learn what the experts have to say about who's hurting whom, the reasons why, and the steps you can take to keep your kids safe from harm.

The New Bully on Campus

Peer abuse has always existed at school, but the kinds of kids who are harassing others have changed. The stereotype of yesteryear—a physically intimidating, low-achieving, socially maladjusted loner—no longer applies. Instead, bullies these days are, often as not, popular

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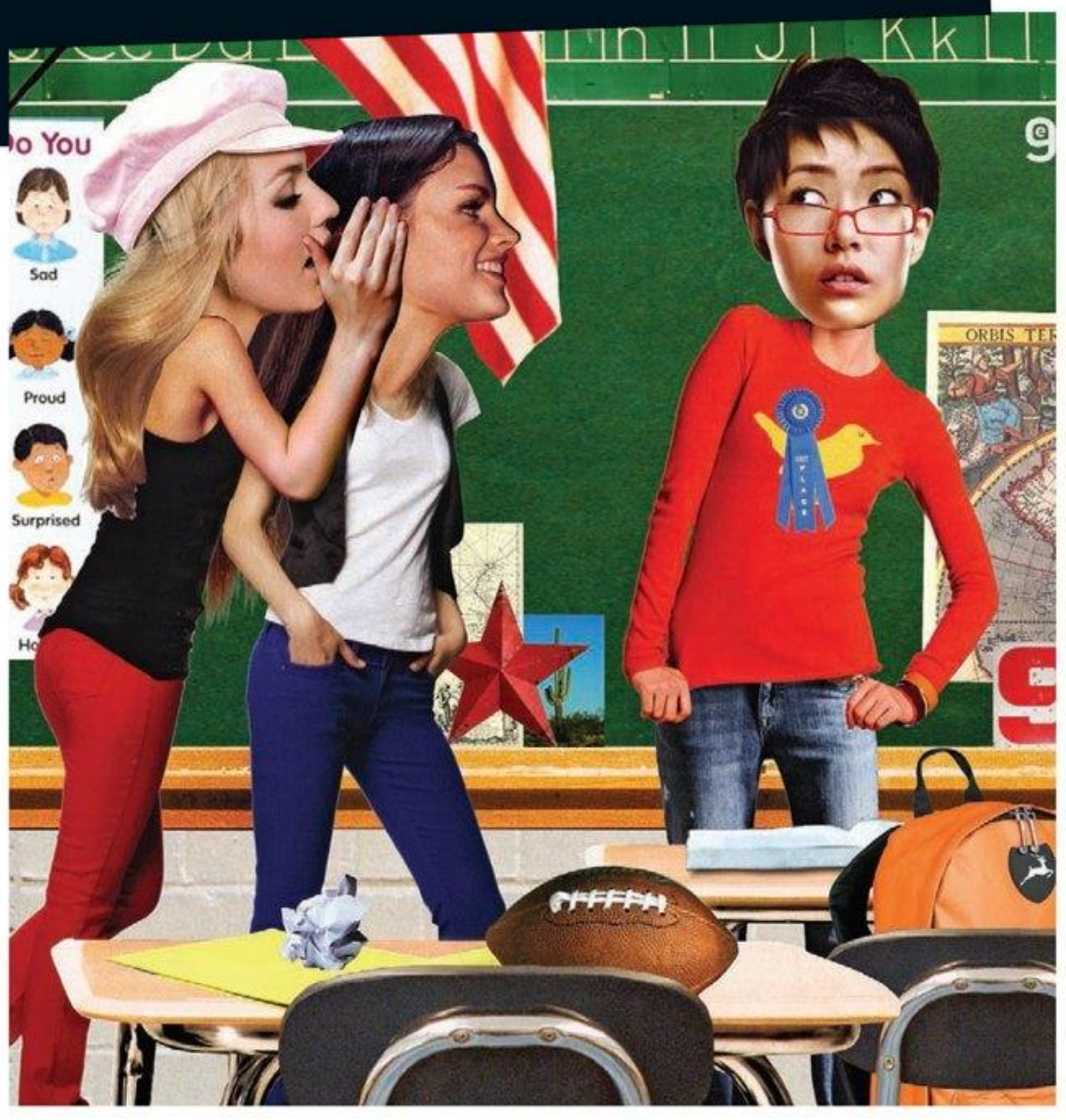
PASSION for EXCELLENCE

"In our enthusiasm to make our children smarter and stronger, we've forgotten they need time and opportunities to learn how to be competent social beings, which is every bit as important as knowing algebra and grammar," says one expert.



kids and academic achievers. "They are alpha girls and quarterbacks and not necessarily kids struggling to gain a social foothold," says Elisabeth Englander, director of the Massachusetts Aggression Reduction Center at Bridgewater State College, which runs anti-bullying programs in K-12 schools. Girls are slightly more likely than boys to act out against others—not physically, but by using tactics like alienation, ostracism and deliberate rumors calculated to inflict maximum psychological damage.

So what causes a student who is doing well to go out of his or her way to hurt another? For one, there's the momentary rush kids get from being perceived as dominant in a group situation. But research suggests that the growing frequency and intensity of bullying may be the result of a troubling decline in social skills among adolescents. In a 2009 study, researchers asked teachers whether they thought children's ability to get along with one another and resolve disputes had improved over the last decade, stayed about the same, declined slightly or declined significantly. Their response was overwhelmingly negative: 75% of educators perceived a significant drop and 25% said they saw a slight decline.

Psychologists say that these changes may be connected to the way we're raising our kids. In the last 20 years opportunities for preschoolers and elementary school kids to engage in free play with other children have pretty much evaporated. Instead, parents relentlessly cram their kids' schedules with an array of adult-led academic and sports enrichment activities. While those certainly have their upside, unsupervised interaction teaches young kids impulse control and enhances emotional stability, which in turn helps them manage friendships and other relationships. "In our enthusiasm to make our children smarter and stronger, we've forgotten that they need time and opportunities to learn how to be competent social beings, which is every bit as important as knowing algebra and grammar," says Kathy Hirsh-Pasek, a professor of psychology at Philadelphia's Temple University who has researched and written extensively on the social, cognitive and emotional growth that accompanies play. While there is no direct evidence to suggest that enrolling your kid in pee-wee soccer or conversational Mandarin will increase the likelihood that he'll turn out to be a bully, research indicates that free play—and plenty of it—does indeed enhance skills needed to avoid the aggressor/victim dynamic.

Technology is short-changing our kids as well. According to a 2010 study by the Kaiser Family Foundation, children between the ages of 8 and 18 now spend about 7.5 hours a day tethered to smart phones, laptops or other devices, up from about 6 hours in 2005. And that doesn't include the 1½ hours they spend texting or talking. It adds up to 63 hours of media every week—and it comes at a price, says Gary Small, a neuroscientist at the University of California, Los Angeles, and author of *iBrain: Surviving the Technological Alteration of the Modern Mind* (Harper). "The time young people spend engaged with technology is time not spent playing on the playground, or learning verbal cues and face-to-face skills, like maintaining eye contact," he says. "Those are all things that could help reduce the surge in school bullying."

Turning the Tide

Like Jill Jones, parents across the nation are uncertain about how to deal with bullying. Experts say the worst thing adults can do is to ignore it. "There's a common—and very mistaken—belief

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MOMster

Want to hear from other moms about school bullying? Go to momster.com/fc/bullying

that it's okay," says Julie Hertzog, director of the Bullying Prevention Project at Pacer, a Minneapolis-based organization for children with disabilities. "Adults say things like, 'It's a normal part of childhood' or 'Boys will be boys,' but that's just plain wrong. And it's not only the targets who suffer. Kids who witness bullying are uncomfortable as well. They often want to help but don't know how to—and fear they could be next."

When Push Comes to Shove

- **Bullying starts in elementary school, peaks in middle school, then tapers off in high school.**
- **79% of incidents take place in hallways, cafeterias and classrooms, 23% outdoors, 8% on school buses, and 4% someplace else.**
- **Emotional abuse is the most prevalent type of harassment, followed by pushing, shoving, tripping and spitting.**
- **Sixth-graders are the students most likely to sustain an injury from bullying. After that, the odds steadily decrease through 12th grade.**

Source: National Center for Education Statistics

But as teachers and administrators can tell you, creating a safe environment for students isn't easy. One of the oldest and most respected bullying prevention programs used by K-12 schools across the country is Olweus, which focuses on improving peer relations by identifying and dismantling the group interaction that gives rise to abuse. Research has found that when onlookers provide an audience for bullying by standing around, watching or laughing, they unwittingly encourage and prolong the behavior. The Olweus program, which includes teacher training and community outreach, tries to curb bullying by discouraging "hangers on" from participating. "We help kids recognize that when there is an incident everyone who is involved—or even aware of it—plays a role," says Marlene Snyder of Olweus, who conducts training sessions for teachers to help kids stop bullying as it happens. "Some kids are disengaged onlookers, others know better but enjoy watching, and some egg the bully on. We teach them that the best way to defend others is not to give your power to someone who wants to harm others." Olweus, which costs about $1,500, is paid for by school districts, parent groups, federal grants or private foundations. Many consider it a worthy investment, including schools in California and Virginia, which saw an average 15% decrease in bullying after one year.

But even the best of such programs are no silver bullet. In a study published this year, longtime bullying researchers Susan Swearer and Dorothy Espelage found that the most effective interventions are "whole school" approaches that include establishing rules and consequences for bullying, teacher involvement, conflict resolution strategies, classroom curriculum and individual social skills training. "All parts of the school should be brought into the conversation," says Swearer. "What's more, special attention and training must be given to some perpetrators to help them come up with socially acceptable ways of dealing with peers." But none of the programs she and Espelage studied really snuffed out abuse; while one-third of them improved kids' level of knowledge, attitude and perceptions about bullying, they did not reduce the number of incidents. Even more disheartening, some remedies—like the assembly-type program that encourages children to write down the names of aggressors and hand slips of papers to the teacher—can actually contribute to a climate of shaming and blaming that fosters bullying.

Some experts believe it takes even more of a village to curb cruelty and that students should participate in setting limits. Sam Chaltain, author of *American Schools: The Art of Creating a Democratic Learning Community* (Rowman & Littlefield Education), believes that bullying is a sign that young people—even high-achieving ones—feel invisible, unconnected and unsure about how to act appropriately. "Like any democratic environment, a school community should have civic ground rules that govern personal behavior. That will help kids understand what is acceptable to say and do so they can become their own anti-bullying program."

Fortunately for Jill Jones, Kacey's elementary school made the right moves. "Her grade had already been organized into teams, so I called the teacher who was her team leader and related what had happened in the cafeteria," Jill says. "This man was not only an excellent instructor but also a supersensitive dad of four kids. He was outraged." The teacher called an emergency meeting of the team leaders, who met with each of the girls involved and laid down the law. They would be suspended if they picked on Kacey again, conspired against her in any way, or were even caught talking about the incident. "Believe it or not, the bullies were duly chastened and never seemed to hold it against my daughter," says Jill. Kacey is now a thriving student with plenty of friends. "She's lucky because the teachers at her school embodied the social lessons that they were teaching," says Jill. In other words, they walked the talk. And that made all the difference. ●

» *Check out our next issue for Part III of our Bullying Special Report.*

Peg Tyre is a prize-winning investigative reporter and author of *The Trouble With Boys: A Surprising Report Card on Our Sons, Their Problems at School and What Parents & Educators Must Do.*

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your treatment for osteoporosis?

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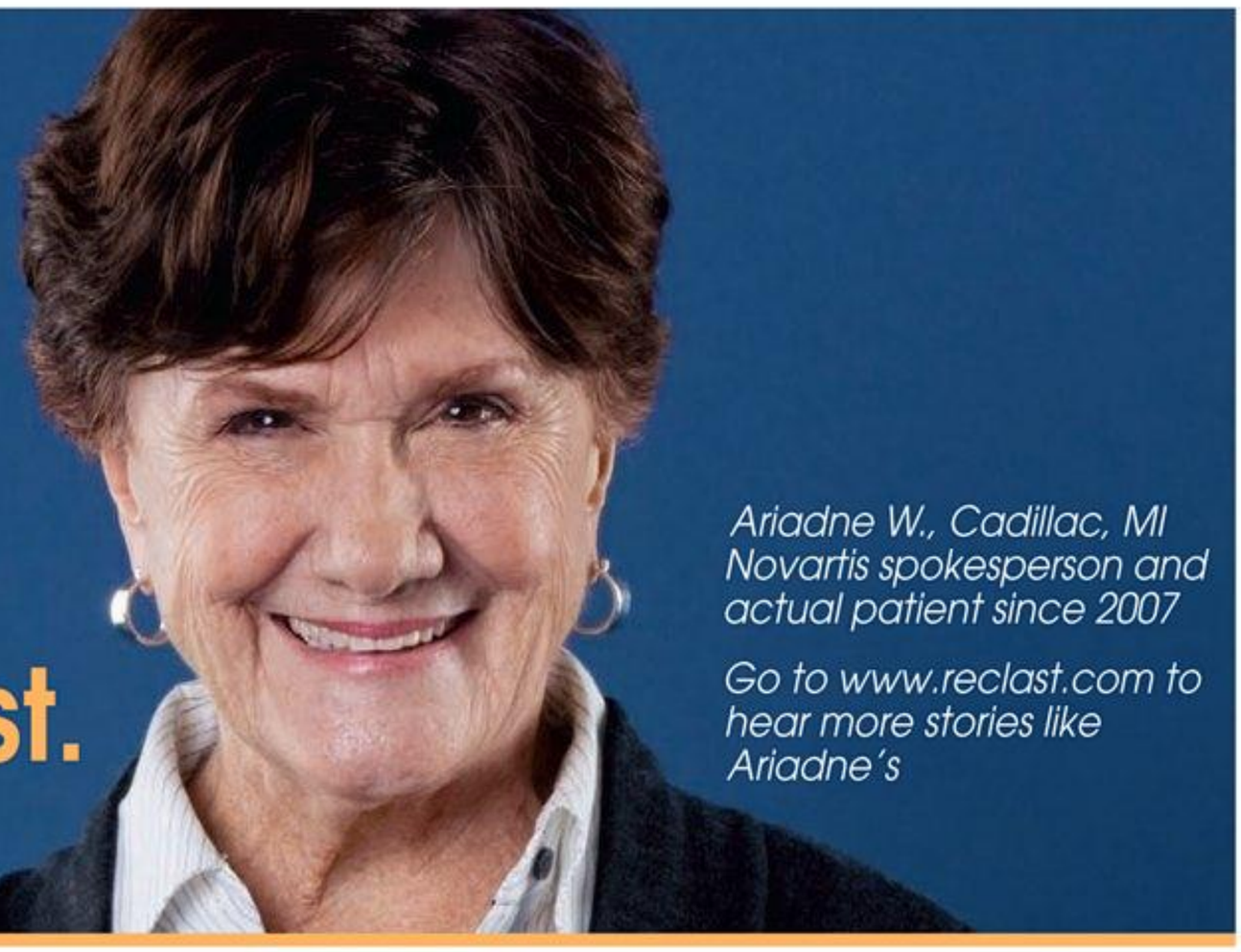
I asked about **Reclast.**



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One annual dose, along with daily calcium and vitamin D, helps to increase bone density, protecting and strengthening your bones.

Reclast is given through an IV. It bypasses your stomach to go directly through the bloodstream to the bones, fortifying them and making them stronger for an entire year.

What to Expect

The benefits of Reclast last for a year. Most common side effects don't. The most common side effects include flu-like symptoms, fever, muscle or joint pain and headache. Most occur within 1–3 days of treatment and can last up to 7–14 days. If you've taken oral bisphosphonates in the past, you are less likely to experience side effects. Taking a mild pain reliever like acetaminophen up to 3 days after treatment may reduce these symptoms.

The Cost

The average cost of a Reclast treatment is under $60 if you've already paid your yearly deductible. That's less than the annual cost of other drugs — including generics! As Reclast is an infusion, costs are covered by Medicare Part B, not Medicare Part D.

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Prescription Reclast is approved to treat postmenopausal osteoporosis.

Important Safety Information:

You should not take Reclast if you're on Zometa® (zoledronic acid) Injection because it contains the same active ingredient. Additionally, you should not take Reclast if you are pregnant, plan to become pregnant, you are nursing, have low blood calcium, kidney problems, or are allergic to Reclast.

It's important to drink fluids before getting Reclast to help prevent kidney problems. Tell your doctor if you have dental problems because rarely, problems with the jaw have been reported with Reclast. Discuss all medicines you are taking, including prescription and non-prescription drugs, vitamins and herbal supplements. If you develop severe bone, joint, or muscle pain, numbness, tingling or muscle spasms, contact your doctor.

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Please see next page for a brief summary of Important Product Information.

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Important Patient Information

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WHAT IS RECLAST?

Reclast is a prescription medication used to treat osteoporosis in women after menopause.

If your doctor prescribes Reclast, you will be given one intravenous (IV) treatment of Reclast for at least 15 minutes to help reduce the risk of osteoporosis-related fractures for twelve months.

WHO SHOULD NOT USE RECLAST?

Anyone who has low blood calcium, is allergic to Reclast, or takes Zometa® (zoledronic acid) Injection should not take Reclast.

WHAT SHOULD I BE AWARE OF BEFORE TAKING RECLAST?

- Reclast contains the same active ingredient found in Zometa. Therefore, if you are being treated with Zometa, you should not take Reclast.
- You should take calcium and vitamin D daily as directed by your doctor.
- If you have low blood calcium, have had parathyroid, thyroid, or intestinal surgery, or have malabsorption syndrome, talk to your doctor.
- Patients with kidney problems should not take Reclast. Your doctor may perform a simple blood test to check your kidney function before administering Reclast.

WHAT SHOULD I BE AWARE OF BEFORE TAKING RECLAST? *(continued)*

- Rarely, jaw bone problems have been reported in patients treated with drugs in this class, including Reclast. Your doctor should give you a routine oral exam prior to prescribing Reclast.
- If you are pregnant, Reclast may cause harm to your baby. Therefore, you should not take Reclast if you are pregnant, plan to become pregnant or are nursing.
- Infrequently, severe incapacitating bone, joint, or muscle pain may occur. Tell your doctor if you experience any of these symptoms.

WHAT ARE THE MOST COMMON SIDE EFFECTS OF RECLAST?

The most common side effects include:

- flu-like illness
- fever
- muscle or joint pain
- headache

Most occur in the days following treatment. A mild pain reliever such as acetaminophen may reduce these symptoms.

For a complete list of Reclast's possible side effects, ask your doctor.

WHAT SHOULD I KNOW ABOUT TAKING RECLAST WITH OTHER MEDICATION?

- You should not take Reclast if you are taking Zometa.
- Tell your doctor about any antibiotics that you are currently taking. Certain antibiotics called aminoglycosides may lower your blood calcium for a long period of time.
- You should tell your doctor if you take diuretics.

STILL HAVE QUESTIONS?

This is only a summary of important information. Ask your doctor for more complete product information, or

- Call 1-866-RECLAST, or
- Visit www.reclast.com.

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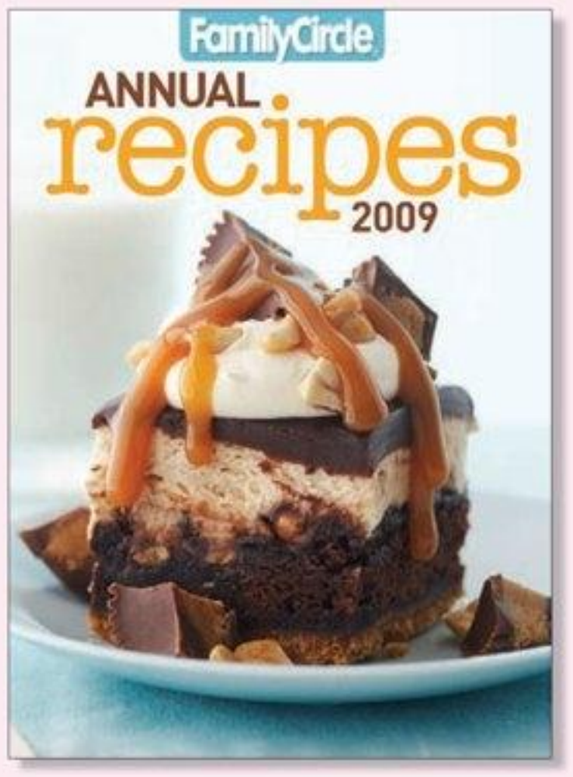

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Spot On

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ILANA, *beauty editor*

»» EDITOR'S PICK ««

the eyes have it

Wanderlove's wands, $17, are the size of a makeup brush and house more eye makeup than you can imagine—easy-to-glide-on cream shadow, shimmery highlighter to spotlight the brow bone or inner corners and, my personal favorite, black liner. They're available in four totally wearable shades that you can toss into the tiniest clutch. This moss-green color is my go-to for fall.

Duane Reade or wanderlovebeauty.com, $17

TALK IS CHIC

Clinton Kelly is a successful author and the cohost of TLC's *What Not to Wear*—off camera, he's charming, funny and passionate about style. His must-haves for fall:

One → A Chunky Knit
"It's tempting to wear an oversize sweater as a cover-up. Choose one that emphasizes your waist so you don't look like a potato."
Dressbarn, $40

Two → A Leather Pencil Skirt
"Pencil skirts and leather are big trends, so why not combine them? Make it sophisticated with black tights and a silk blouse."
H&M, $99

Three → Prints
"It's the season to make a splash with bold color or prints. Rather than demure, be daring."
Alfani, $59

Photos: (print top, knit top) Bryan McCay; (jewelry, makeup, skirt) Peter Ardito; (Blitzer) Karen Pearson.

SEE BUYER'S GUIDE, PAGE 130

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2 Sephora Collection Pink Color-To-Go Palette, $15 → $1 from each sold item to BCRF.

3 Shiseido Makeup Luminizing Lip Gloss in Pop Life (PK406), $22 → $5 from each sale to Cancer and Careers.

4 Beegee Bag, $82 → 10% of proceeds to Susan G. Komen for the Cure.

5 TOCS Analog Oblong Watch in Pink Flamingo, $50 → 20% of online sales during October to Susan G. Komen for the Cure.

6 Pink Pony Collection by Ralph Lauren Organic Tote, $10 → 100% of net proceeds to the Pink Pony Fund of the Polo Ralph Lauren Foundation.

7 OPI Nail Lacquers in Pink of Hearts, $8.50 → $25,000 donation to Susan G. Komen for the Cure.

8 Fergie Footwear Hope Shoe for QVC, $45 → 100% of net proceeds starting October 15 to benefit breast cancer research and education.

9 Dyanne Belle You're an Angel Bracelet, $110 → 30% of proceeds to SHARE, a support network for breast cancer survivors.

10 Ford Warriors in Pink 2010 Warrior Argyle Tie, $29 → 100% of net proceeds to Susan G. Komen for the Cure.

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Important Safety Information about SYMBICORT for COPD

Call your doctor if you notice any of the following symptoms: change in amount or color of sputum, fever, chills, increased cough, or increased breathing problems.

SYMBICORT may increase your risk of lung infection, osteoporosis, and some eye problems (cataracts or glaucoma). You should have regular eye exams.

Thrush in the mouth and throat may occur.

Tell your doctor if you have a heart condition or high blood pressure before taking SYMBICORT. Do not use SYMBICORT with another long-acting beta$_2$-agonist for any reason. SYMBICORT does not replace fast-acting inhalers for sudden symptoms.

Approved Uses for SYMBICORT for COPD

SYMBICORT 160/4.5 is approved for adults with COPD, including chronic bronchitis and emphysema. You should only take 2 inhalations of SYMBICORT twice a day. Higher doses will not provide additional benefits.

Please see Important Product Information on adjacent page and discuss with your doctor.

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IMPORTANT INFORMATION ABOUT SYMBICORT

Please read this summary carefully and then ask your doctor about SYMBICORT.

No advertisement can provide all the information needed to determine if a drug is right for you or take the place of careful discussions with your health care provider. Only your health care provider has the training to weigh the risks and benefits of a prescription drug.

WHAT IS THE MOST IMPORTANT INFORMATION I SHOULD KNOW ABOUT SYMBICORT?

People with asthma who take long-acting $beta_2$-agonist (LABA) medicines, such as formoterol (one of the medicines in SYMBICORT), have an increased risk of death from asthma problems. It is not known whether budesonide, the other medicine in SYMBICORT, reduces the risk of death from asthma problems seen with formoterol.

SYMBICORT should be used only if your health care provider decides that your asthma is not well controlled with a long-term asthma control medicine, such as an inhaled corticosteroid, or that your asthma is severe enough to begin treatment with SYMBICORT.

Talk with your health care provider about this risk and the benefits of treating your asthma with SYMBICORT.

If you are taking SYMBICORT, see your health care provider if your asthma does not improve or gets worse. It is important that your health care provider assess your asthma control on a regular basis. Your doctor will decide if it is possible for you to stop taking SYMBICORT and start taking a long-term asthma control medicine without loss of asthma control.

Get emergency medical care if:

- breathing problems worsen quickly, and
- you use your rescue inhaler medicine, but it does not relieve your breathing problems.

Children and adolescents who take LABA medicines may be at increased risk of being hospitalized for asthma problems.

WHAT IS SYMBICORT?

SYMBICORT is an inhaled prescription medicine used for asthma and chronic obstructive pulmonary disease (COPD). It contains two medicines:

- Budesonide (the same medicine found in Pulmicort Flexhaler™, an inhaled corticosteroid). Inhaled corticosteroids help to decrease inflammation in the lungs. Inflammation in the lungs can lead to asthma symptoms
- Formoterol (the same medicine found in Foradil® Aerolizer®). LABA medicines are used in patients with COPD and asthma to help the muscles in the airways of your lungs stay relaxed to prevent asthma symptoms, such as wheezing and shortness of breath. These symptoms can happen when the muscles in the airways tighten. This makes it hard to breathe, which, in severe cases, can cause breathing to stop completely if not treated right away

SYMBICORT is used for asthma and chronic obstructive pulmonary disease as follows:

Asthma

SYMBICORT is used to control symptoms of asthma and prevent symptoms such as wheezing in adults and children ages 12 and older.

Chronic Obstructive Pulmonary Disease

COPD is a chronic lung disease that includes chronic bronchitis, emphysema, or both. SYMBICORT 160/4.5 mcg is used long term, two times each day, to help improve lung function for better breathing in adults with COPD.

WHO SHOULD NOT USE SYMBICORT?

Do not use SYMBICORT to treat sudden severe symptoms of asthma or COPD or if you are allergic to any of the ingredients in SYMBICORT.

WHAT SHOULD I TELL MY HEALTH CARE PROVIDER BEFORE USING SYMBICORT?

Tell your health care provider about all of your health conditions, including if you:

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- have seizures
- have thyroid problems
- have diabetes
- have liver problems
- have osteoporosis
- have an immune system problem
- have eye problems such as increased pressure in the eye, glaucoma, or cataracts
- are allergic to any medicines
- are exposed to chicken pox or measles
- **are pregnant or planning to become pregnant.** It is not known if SYMBICORT may harm your unborn baby
- **are breast-feeding.** Budesonide, one of the active ingredients in SYMBICORT, passes into breast milk. You and your health care provider should decide if you will take SYMBICORT while breast-feeding

Tell your health care provider about all the medicines you take including prescription and nonprescription medicines, vitamins, and herbal supplements. SYMBICORT and certain other medicines may interact with each other and can cause serious side effects. Know all the medicines you take. Keep a list and show it to your health care provider and pharmacist each time you get a new medicine.

HOW DO I USE SYMBICORT?

Do not use SYMBICORT unless your health care provider has taught you and you understand everything. Ask your health care provider or pharmacist if you have any questions.

Use SYMBICORT exactly as prescribed. **Do not use SYMBICORT more often than prescribed.** SYMBICORT comes in two strengths for asthma: 80/4.5 mcg and 160/4.5 mcg. Your health care provider will prescribe the strength that is best for you. SYMBICORT 160/4.5 mcg is the approved dosage for COPD.

- SYMBICORT should be taken every day as 2 puffs in the morning and 2 puffs in the evening.
- Rinse your mouth with water and spit the water out after each dose (2 puffs) of SYMBICORT. This will help lessen the chance of getting a fungus infection (thrush) in the mouth and throat.
- Do not spray SYMBICORT in your eyes. If you accidentally get SYMBICORT in your eyes, rinse your eyes with water. If redness or irritation persists, call your health care provider.
- Do not change or stop any medicines used to control or treat your breathing problems. Your health care provider will change your medicines as needed
- **While you are using SYMBICORT 2 times each day, do not use other medicines that contain a long-acting $beta_2$-agonist (LABA) for any reason. Ask your health care provider or pharmacist if any of your other medicines are LABA medicines.**
- SYMBICORT does not relieve sudden symptoms. Always have a rescue inhaler medicine with you to treat sudden symptoms. If you do not have a rescue inhaler, call your health care provider to have one prescribed for you.

Call your health care provider or get medical care right away if:

- your breathing problems worsen with SYMBICORT
- you need to use your rescue inhaler medicine more often than usual
- your rescue inhaler does not work as well for you at relieving symptoms
- you need to use 4 or more inhalations of your rescue inhaler medicine for 2 or more days in a row
- you use one whole canister of your rescue inhaler medicine in 8 weeks' time
- your peak flow meter results decrease. Your health care provider will tell you the numbers that are right for you
- your symptoms do not improve after using SYMBICORT regularly for 1 week

WHAT MEDICATIONS SHOULD I NOT TAKE WHEN USING SYMBICORT?

While you are using SYMBICORT, do not use other medicines that contain a long-acting $beta_2$-agonist (LABA) for any reason, such as:

- Serevent® Diskus® (salmeterol xinafoate inhalation powder)
- Advair Diskus® or Advair® HFA (fluticasone propionate and salmeterol)
- Formoterol-containing products such as Foradil Aerolizer, Brovana®, or Perforomist®

WHAT ARE THE POSSIBLE SIDE EFFECTS WITH SYMBICORT?

SYMBICORT can cause serious side effects.

- Increased risk of pneumonia and other lower respiratory tract infections if you have COPD. Call your health care provider if you notice any of these symptoms: increase in mucus production, change in mucus color, fever, chills, increased cough, increased breathing problems
- Serious allergic reactions including rash; hives; swelling of the face, mouth and tongue; and breathing problems. Call your health care provider or get emergency care if you get any of these symptoms
- Immune system effects and a higher chance for infections
- Adrenal insufficiency–a condition in which the adrenal glands do not make enough steroid hormones
- Cardiovascular and central nervous system effects of LABAs, such as chest pain, increased blood pressure, fast or irregular heartbeat, tremor, or nervousness
- Increased wheezing right after taking SYMBICORT
- Eye problems, including glaucoma and cataracts. You should have regular eye exams while using SYMBICORT
- Osteoporosis. People at risk for increased bone loss may have a greater risk with SYMBICORT
- Slowed growth in children. As a result, growth should be carefully monitored
- Swelling of your blood vessels. This can happen in people with asthma
- Decreases in blood potassium levels and increases in blood sugar levels

WHAT ARE COMMON SIDE EFFECTS OF SYMBICORT?

Patients with Asthma

Sore throat, headache, upper respiratory tract infection, thrush in the mouth and throat

Patients with COPD

Thrush in the mouth and throat

These are not all the side effects with SYMBICORT. Ask your health care provider or pharmacist for more information.

NOTE: This summary provides important information about SYMBICORT. For more information, please ask your doctor or health care provider.

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Visit **www.MySymbicort.com**
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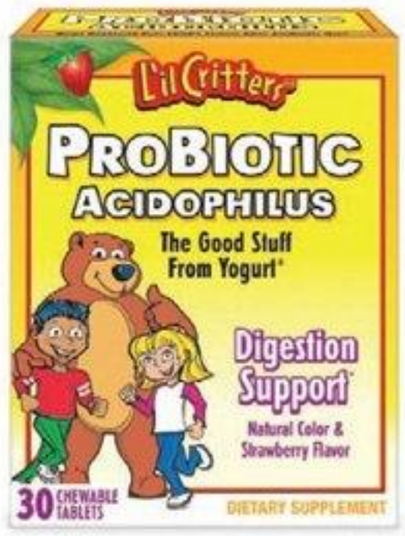

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LET IT SHINE

THE TREATMENTS, TOOLS AND TRICKS TO GET HEALTHY, LUSTROUS HAIR

BY ILANA BLITZER PHOTOGRAPHY BY SONJA PACHO

SHINY HAIR SIGNALS THAT YOUR STRANDS ARE HEALTHY TOO. And fewer than 2 in 10 women ages 35 to 54 describe their hair as healthy, according to a new study conducted by the hair care company Finesse.

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Hair: Jeanie Syfu for Tresemmé/contactnyc. Makeup: Claudia Lake for contactnyc.

CURLY CUES

Calling all curl-friends: Whether you're blessed with ringlets, waves or something in between, stop fighting your natural texture. Curls will shine when you embrace them—and these tips.

MOISTURE RICH Quick hair lesson: Light reflects naturally off flat surfaces (like the closed cuticle of straight locks), so to get your curls to catch light you need to give your hair what it's lacking—essential oils, proteins and amino acids. In other words, lots of moisture to smooth the surface, says Michael Duenas, a celebrity stylist and founder of Hair Room Service in NYC.

SKIP A SHAMPOO—OR TWO Sudsing can strip your strands, so don't do it every day—just rinse with water and use conditioner. "Your hair will still take in the moisture it needs without losing any essential oils," says Duenas. For an even creamier conditioner, do like the pros and add a pinch of baking soda to the mix. And when lathering up is a must, choose a sulfate-free shampoo, which is less harsh.

GET IN CONDITION Bet you never thought working with your curly texture could mean using fewer products. While hair is soaking wet, finger-comb conditioner through strands so they're soft and slippery, says Duenas. Don't rinse. Afterward, scrunch hair with a cotton T-shirt, paper towel or microfiber—never terry cloth, which can create frizz. Then air-dry.

FUSE IT For more defined curls, rely on the trusty diffuser. Aim the prongs upward from underneath to keep the curls intact and give them lift, says NYC stylist Jeanie Syfu. Hair will fall into its natural curl formation—just don't wreck it by using your fingers to style.

STRAIGHT TALK

That perfect TV commercial hair isn't just something to envy—it's what you deserve. Treat straight tresses to TLC for your own enviable sleekness.

COOL DOWN Finish your rinse in the shower with a quick spray of cold water. There's a reason salons do it: The chilly temp helps to close the cuticle, resulting in increased shine and softness.

SMOOTH MOVE Get your strands almost dry by moving hair around the head and rotating your blow-dryer in all directions, says Syfu. Doing so adds volume, plus you'll spend less time later smoothing hair out with a round brush or flat iron.

BRUSH UP To make hair really shine, you need the tension of a combo nylon-and-boar-bristle brush, says Syfu. Nylon bristles help the brush glide through strands, while boar bristles add polish by distributing hair's natural oils. A good test: Take your brush and twist it about halfway through a section of hair—it should stay put, not slip out.

DRY SPELL Blow-dryers can be damaging if not used the right way. For maximum gloss, the best possible way to dry is on a high speed, high heat setting. To keep hair healthy, reduce your blow-drying time and finish with either a flat iron to seal in silkiness, or a curling iron to add some movement, says Tom DeRosa, a hairstylist in NYC. Avoid frying strands by upgrading to a ceramic iron, like the Sedu Ionic Ceramic Pro Flat Iron (folica.com, $130), which eliminates frizz with less damage.

Bipolar depression doesn't just affect you.

It can consume you.

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SEROQUEL XR is an option proven effective for treating bipolar depression.

It's easy to feel like you're fading into the background when you're living with bipolar depression. SEROQUEL XR has been proven to work alone to effectively treat bipolar depression. And for many people, it's just one pill, once a day. Bipolar depression doesn't have to consume you. Talk to your doctor. Understand your options. And discuss whether XR—SEROQUEL XR—is right for you. To learn more, visit seroquelXR.com

Important Safety Information About SEROQUEL XR

Elderly patients with dementia-related psychosis (having lost touch with reality due to confusion and memory loss) treated with this type of medicine are at an increased risk of death, compared to placebo (sugar pill). SEROQUEL XR is not approved for treating these patients.

Antidepressants have increased the risk of suicidal thoughts and actions in some children, teenagers, and young adults. Patients of all ages starting treatment should be watched closely for worsening of depression, suicidal thoughts or actions, unusual changes in behavior, agitation, and irritability. Patients, families, and caregivers should pay close attention to any changes, especially sudden changes in mood, behaviors, thoughts, or feelings. This is very important when an antidepressant medicine is started or when the dose is changed. Report any change in these symptoms immediately to the doctor. SEROQUEL XR is not approved for patients under the age of 18 years.

- Stop SEROQUEL XR and call your doctor right away if you have some or all of the following symptoms: high fever; stiff muscles; confusion; sweating; changes in pulse, heart rate, and blood pressure. These may be symptoms of neuroleptic malignant syndrome (NMS), a rare and serious condition that can lead to death
- High blood sugar and diabetes have been reported with SEROQUEL XR and medicines like it. If you have diabetes or risk factors such as obesity or a family history of diabetes, your doctor should check your blood sugar before you start taking SEROQUEL XR and also during therapy. If you develop symptoms of high blood sugar or diabetes, such as excessive thirst or hunger, increased urination, or weakness, contact your doctor. Complications from diabetes can be serious and even life threatening
- Increases in triglycerides and in LDL (bad) cholesterol and decreases in HDL (good) cholesterol have been reported with SEROQUEL XR. Your doctor should check your cholesterol levels before you start SEROQUEL XR and during therapy
- Weight gain has been reported with SEROQUEL XR. Your doctor should check your weight regularly
- Tell your doctor about any movements you cannot control in your face, tongue, or other body parts, as they may be signs of a serious condition called tardive dyskinesia (TD). TD may not go away, even if you stop taking SEROQUEL XR. TD may also start after you stop taking SEROQUEL XR
- Other risks include feeling dizzy or lightheaded upon standing, decreases in white blood cells (which can be fatal), or trouble swallowing. Tell your doctor if you experience any of these
- Before starting treatment, tell your doctor about all prescription and nonprescription medicines you are taking. Also tell your doctor if you have or have had low white blood cell count, seizures, abnormal thyroid tests, high prolactin levels, heart or liver problems, or cataracts. An eye exam for cataracts is recommended at the beginning of treatment and every 6 months thereafter
- Since drowsiness has been reported with SEROQUEL XR, you should not participate in activities such as driving or operating machinery until you know that you can do so safely. Avoid becoming overheated or dehydrated while taking SEROQUEL XR. Do not drink alcohol while taking SEROQUEL XR
- Tell your doctor if you are pregnant or intend to become pregnant. Avoid breast-feeding while taking SEROQUEL XR
- The most common side effects are drowsiness, dry mouth, constipation, dizziness, increased appetite, upset stomach, weight gain, fatigue, disturbance in speech and language, and stuffy nose
- Do not stop taking SEROQUEL XR without talking to your doctor. Stopping SEROQUEL XR suddenly may cause side effects

This is not a complete summary of safety information. Please discuss the full Prescribing Information for prescription SEROQUEL XR with your health care provider.

Indications

SEROQUEL XR is a once-daily tablet approved in adults for acute depressive episodes in bipolar disorder; acute manic or mixed episodes in bipolar disorder alone or with lithium or divalproex; and long-term treatment of bipolar disorder with lithium or divalproex.

Please see Brief Summary, including Boxed Warnings, on adjacent pages.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

For a free doctor conversation guide, visit seroquelXR.com or call 1-866-331-3010.

If you're without prescription coverage and can't afford your medication, AstraZeneca may be able to help. For more information, please visit seroquelXR.com

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Bipolar depression doesn't have to consume you.

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IMPORTANT INFORMATION ABOUT SEROQUEL XR (SER-oh-kwell)

Please read this summary carefully before you start taking SEROQUEL XR and each time you get a refill. There may be new information.
No advertisement can provide all the information needed to determine if a drug is right for you or take the place of careful discussions with your health care provider. Only your health care provider has the training to weigh the risks and benefits of a prescription drug.

What is the most important information I should know about SEROQUEL XR?

Serious side effects may happen when you take SEROQUEL XR, including:

- **Risk of death in the elderly with dementia: Medicines like SEROQUEL XR can raise the risk of death in elderly people who have lost touch with reality due to confusion and memory loss (dementia).** SEROQUEL XR is not approved for treating psychosis in the elderly with dementia.
- **Risk of suicidal thoughts or actions: Antidepressant medicines, depression and other serious mental illnesses, and suicidal thoughts or actions:**
  1. **Antidepressant medicines may increase suicidal thoughts or actions in some children, teenagers, and young adults within the first few months of treatment.**
  2. **Depression and other serious mental illnesses are the most important causes of suicidal thoughts and actions. Some people may have a particularly high risk of having suicidal thoughts or actions.** These include people who have (or have a family history of) depression, bipolar illness (also called manic-depressive illness), or suicidal thoughts or actions.
  3. **How can I watch for and try to prevent suicidal thoughts and actions in myself or a family member?**
     - Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts, or feelings. This is very important when an antidepressant medicine is started or when the dose is changed.
     - Call the health care provider right away to report new or sudden changes in mood, behaviors, thoughts, or feelings.
     - Keep all follow-up visits with the health care provider as scheduled. Call the health care provider between visits as needed, especially if you have concerns about symptoms.

Call a health care provider right away if you or your family member has any of the following symptoms, especially if they are new, worse, or worry you:

- thoughts about suicide or dying
- attempts to commit suicide
- new or worse depression
- new or worse anxiety
- feeling very agitated or restless
- panic attacks
- trouble sleeping (insomnia)
- new or worse irritability
- acting aggressive, being angry, or violent
- acting on dangerous impulses
- an extreme increase in activity and talking (mania)
- other unusual changes in behavior or mood

What else do I need to know about antidepressant medicines?

- **Never stop an antidepressant medicine without first talking to your health care provider.** Stopping an antidepressant medicine suddenly can cause other symptoms.
- **Antidepressants are medicines used to treat depression and other illnesses.** It is important to discuss all the risks of treating depression and also the risks of not treating it. Patients and their families or other caregivers should discuss all treatment choices with the health care provider, not just the use of antidepressants.
- **Antidepressant medicines have other side effects.** Talk to the health care provider about the side effects of the medicine prescribed for you or your family member.
- **Antidepressant medicines can interact with other medicines.** Know all of the medicines that you or your family member take. Keep a list of all medicines to show the health care provider. Do not start new medicines without first checking with your health care provider.
- **Not all antidepressant medicines prescribed for children are FDA approved for use in children.** Talk to your child's health care provider for more information.

What is SEROQUEL XR?

SEROQUEL XR is a prescription medicine used to treat bipolar disorder in adults, including

- manic episodes associated with bipolar disorder alone or with lithium or divalproex
- depressive episodes associated with bipolar disorder
- long-term treatment of bipolar I disorder with lithium or divalproex

SEROQUEL XR is not approved for patients under 18 years of age.

What are the symptoms of Bipolar Disorder?

- General symptoms of bipolar disorder include extreme mood swings, along with other specific symptoms and behaviors. These mood swings, or "episodes," include manic (highs) and depressive (lows)
- Common symptoms of a manic episode include feeling extremely happy, being very irritable, restless, talking too fast and too much, and having more energy and needing less sleep than usual
- Common symptoms of a depressive episode include feelings of sadness or emptiness, increased tearfulness, a loss of interest in activities you once enjoyed, loss of energy, difficulty concentrating or making decisions, feelings of worthlessness or guilt, and changes in sleep or appetite
- Thoughts of death or suicide

What should I tell my health care provider before taking SEROQUEL XR?

Before taking SEROQUEL XR, tell your health care provider if you have or have had

- diabetes or high blood sugar in you or your family: your health care provider should check your blood sugar before you start SEROQUEL XR and also during therapy
- high levels of total cholesterol, triglycerides or LDL-cholesterol or low levels of HDL-cholesterol
- low or high blood pressure
- low white blood cell count
- cataracts
- seizures
- abnormal thyroid tests
- high prolactin levels
- heart problems
- liver problems
- any other medical condition
- pregnancy or plans to become pregnant. It is not known if SEROQUEL XR will harm your unborn baby
- breast-feeding or plans to breast-feed. It is not known if SEROQUEL XR will pass into your breast milk. You and your health care provider should decide if you will take SEROQUEL XR or breast-feed. You should not do both

Tell the health care provider about all the medicines that you take or recently have taken including prescription medicines, nonprescription medicines, herbal supplements and vitamins.
SEROQUEL XR and other medicines may affect each other causing serious side effects. SEROQUEL XR may affect the way other medicines work, and other medicines may affect how SEROQUEL XR works.
Especially tell your health care provider if you take or plan to take medicines for:

- depression
- Parkinson's disease
- high blood pressure
- trouble sleeping

Also tell your health care provider if you take or plan to take any of these medicines:

- phenytoin, divalproex or carbamazepine (for epilepsy)
- barbiturates (to help you sleep)
- rifampin (for tuberculosis)
- glucocorticoids (steroids for inflammation)
- thioridazine (an antipsychotic)
- ketoconazole, fluconazole or itraconazole (for fungal infections)
- erythromycin (an antibiotic)
- protease inhibitors (for HIV)

This is not a complete list of medicines that can affect or be affected by SEROQUEL XR. Your doctor can tell you if it is safe to take SEROQUEL XR with your other medicines. Do not start or stop any medicines while taking SEROQUEL XR without talking to your health care provider first. Know the medicines you take. Keep a list of your medicines to show your health care provider and pharmacist when you get a new medicine.
Tell your health care provider if you are having a urine drug screen because SEROQUEL XR may affect your test results. Tell those giving the test that you are taking SEROQUEL XR.

For more information about **SEROQUEL XR**,
visit **www.SEROQUELXR.com** or call **1-800-236-9933**.

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How should I take SEROQUEL XR?

- Take SEROQUEL XR exactly as your health care provider tells you to take it. Do not change the dose yourself.
- Take SEROQUEL XR by mouth, with a light meal or without food.
- SEROQUEL XR should be swallowed whole and not split, chewed or crushed.
- If you feel you need to stop SEROQUEL XR, talk with your health care provider first.

If you suddenly stop taking SEROQUEL XR, you may experience side effects such as trouble sleeping or trouble staying asleep (insomnia), nausea, and vomiting.

- If you miss a dose, take it as soon as you remember. If it is close to the next dose, skip the missed dose. Just take the next dose at your regular time. Do not take 2 doses at the same time unless your health care provider tells you to. If you are not sure about your dosing, call your health care provider.
- If you take too much SEROQUEL XR, call your health care provider or poison control center at 1-800-222-1222 right away or go to the nearest hospital emergency room.

What should I avoid while taking SEROQUEL XR?

Do not drive, operate machinery, or do other dangerous activities until you know how SEROQUEL XR affects you. SEROQUEL XR may make you drowsy.

- Avoid getting overheated or dehydrated.
  - Do not over-exercise.
  - In hot weather, stay inside in a cool place if possible.
  - Stay out of the sun. Do not wear too much or heavy clothing.
  - Drink plenty of water.
- Do not drink alcohol while taking SEROQUEL XR. It may make some side effects of SEROQUEL XR worse.

What are possible side effects of SEROQUEL XR?

Also see "What is the most important information I should know about SEROQUEL XR?" at the beginning of this document.

Serious side effects have been reported with SEROQUEL XR including:

- **Neuroleptic malignant syndrome (NMS):** Tell your health care provider right away if you have some or all of the following symptoms: high fever, stiff muscles, confusion, sweating, changes in pulse, heart rate, and blood pressure. These may be symptoms of a rare and serious condition that can lead to death. Stop SEROQUEL XR and call your health care provider right away
- **High blood sugar (hyperglycemia):** Increases in blood sugar can happen in some people who take SEROQUEL XR. Extremely high blood sugar can lead to coma or death. If you have diabetes or risk factors for diabetes (such as being overweight or a family history of diabetes) your health care provider should check your blood sugar before you start SEROQUEL XR and during therapy

  Call your health care provider if you have any of these symptoms of high blood sugar while taking SEROQUEL XR
  - feel very thirsty
  - need to urinate more than usual
  - feel very hungry
  - feel weak or tired
  - feel sick to your stomach
  - feel confused, or your breath smells fruity
- **High cholesterol and triglyceride levels in the blood (fat in the blood):** Increases in total cholesterol, triglycerides and LDL (bad) cholesterol and decreases in HDL (good) cholesterol have been reported in clinical trials with SEROQUEL XR. You may not have any symptoms, so your health care provider should do blood tests to check your cholesterol and triglyceride levels before you start taking SEROQUEL XR and during therapy
- **Increase in weight (weight gain):** Weight gain has been seen in patients who take SEROQUEL XR so you and your health care provider should check your weight regularly
- **Tardive dyskinesia:** Tell your health care provider about any movements you cannot control in your face, tongue, or other body parts. These may be signs of a serious condition. Tardive dyskinesia may not go away, even if you stop taking SEROQUEL XR. Tardive dyskinesia may also start after you stop taking SEROQUEL XR
- **Orthostatic hypotension (decreased blood pressure):** lightheadedness or fainting caused by a sudden change in heart rate and blood pressure when rising too quickly from a sitting or lying position
- **Increases in blood pressure:** reported in children and teenagers. Your health care provider should check blood pressure in children and adolescents before starting SEROQUEL XR and during therapy. SEROQUEL XR is not approved for patients under 18 years of age
- **Low white blood cell count**
- **Cataracts**
- **Seizures**
- **Abnormal thyroid tests:** Your health care provider may do blood tests to check your thyroid hormone level
- **Increases in prolactin levels:** Your health care provider may do blood tests to check your prolactin levels
- **Increases in liver enzymes:** Your health care provider may do blood tests to check your liver enzyme levels
- **Long lasting and painful erection**
- **Difficulty swallowing**

Common possible side effects with SEROQUEL XR include:

- drowsiness
- dry mouth
- constipation
- dizziness
- increased appetite
- upset stomach
- weight gain
- fatigue
- disturbance in speech and language
- stuffy nose

These are not all the possible side effects of SEROQUEL XR. For more information, ask your health care provider or pharmacist.

Call your health care provider for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How should I store SEROQUEL XR?

- Store SEROQUEL XR at room temperature, between 59°F to 86°F (15°C to 30°C)
- Keep SEROQUEL XR and all medicines out of the reach of children

What are the ingredients in SEROQUEL XR?

Active ingredient: quetiapine fumarate

Inactive ingredients: lactose monohydrate, microcrystalline cellulose, sodium citrate, hypromellose, and magnesium stearate. The film coating for all SEROQUEL XR tablets contain hypromellose, polyethylene glycol 400 and titanium dioxide. In addition, yellow iron oxide (50, 200 and 300 mg tablets) and red iron oxide (50 mg tablets) are included in the film coating of specific strengths.

General information about SEROQUEL XR

Do not take SEROQUEL XR unless your health care provider has prescribed it for you for your condition. Do not share SEROQUEL XR with other people, even if they have the same condition. It may harm them.

NOTE: This summary provides important information about SEROQUEL XR. For more information about SEROQUEL XR, talk with your health care provider or pharmacist or call 1-800-236-9933. You can ask your health care provider for full Prescribing Information about SEROQUEL XR that is written for health care providers and discuss it with him or her.

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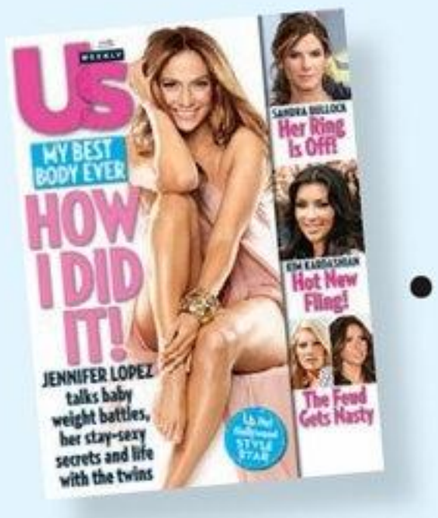

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HEALTH

→ SMART WAYS TO LIVE WELL → STRATEGIES FOR EATING RIGHT → EASY FITNESS PLANS

Hair: George Ortiz for L'Oréal Professionnel. Makeup: Emily Kate Warren. Shot on location at Almond Smugglers Cove, St. Lucia.
Sports Tank, Alo, $48, alosport.com. Pants, Champion, $36, championusa.com.

Take It Outside

Step off the treadmill and head outdoors. People who spend just five minutes a day gardening, walking or cycling near trees, flowers or water have better mental health than those who work out indoors, says new English research—most likely because exposure to nature has a calming effect. So think beyond the gym: Try hiking, jumping rope in your yard, throwing a ball with your family at the park or perfecting your favorite yoga moves in the fresh air.

PHOTOGRAPHY BY **KAREN PEARSON**

→ BY JANE BIANCHI

Unsweeten the Deal

There's no need to sugarcoat this: If you're like most Americans, you drink at least two sweetened beverages a day. In addition to leading to weight gain, this may strain your heart by tightening blood vessels. To reduce your risk for cardiovascular problems, cut out at least 12 ounces (one can) of soda or fruit drinks, like lemonade or punch, every day. In one to three months, you could see your blood pressure drop, according to research from Louisiana State University Health Sciences Center in New Orleans. Keep it up for a year, and you may also lose anywhere from 2 to 15 pounds, depending on your metabolism.

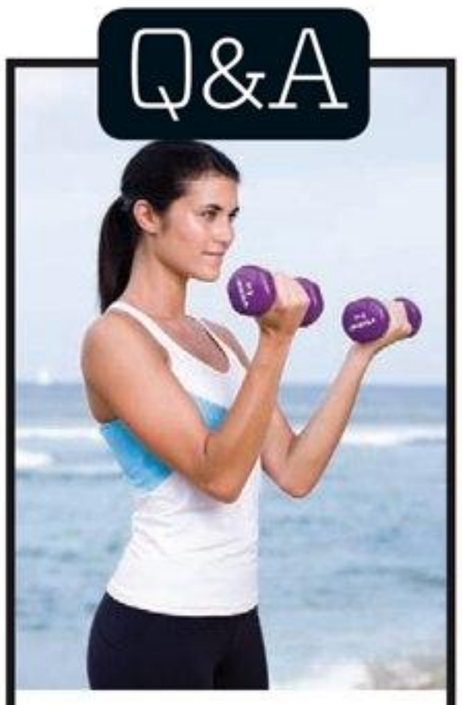
the udder truth

In addition to having no fat, skim milk has the fewest calories and the most calcium. For a head-to-head nutritional breakdown of the four kinds of milk, check out this table from *The Real Life Body Book* (Celestial Arts).

1 CUP	FAT (g)	CALORIES (kcal)	CALCIUM (mg)
Whole milk	9	150	290
2% milk	5	140	298
1% milk	2	120	300
Nonfat milk	0	90	301

HOLY COW! Drinking just one glass of milk provides nine essential nutrients.

Q&A



Q: I want toned muscles. Which is better: a lot of reps with a light weight or a few reps with a heavier weight?

A: Reach for a heavier weight. Don't worry, you won't look like a bodybuilder: It's extra calories and protein that bring on the bulk. Studies show that lifting more weight for fewer reps is the best way to strengthen muscles, burn calories and increase metabolism. Once you can comfortably raise a dumbbell 12 times, switch to a bigger one (or if you're using a machine, push the pin into the next higher weight). Then lift 5 to 8 times, upping your reps gradually until you get to 12 again.

55% That's how much more vitamin D gets into your bloodstream when you take the supplement while eating the largest meal of the day—whichever one that happens to be for you. The more food you eat, the better your body absorbs the nutrient. Perhaps the "D" stands for dinner? Source: The Cleveland Clinic in Ohio

Photos: (soda) istock photo; (model) Karen Pearson. Hair: George Ortiz for L'Oréal Professionnel. Makeup: Emily Kate Warren. Shot on location at Almond Smugglers Cove, St. Lucia.

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NO ONE'S EVER TOLD YOU TO "GROW A PAIR."

Courage. You were born with it. And what better way to nurture that feeling than with a little extra care down there? After all, when you're clean and fresh, you can focus on any opportunity that comes your way. So be ready. Slip a packet of Summer's Eve Feminine Cleansing Cloths into your bag. Gynecologist tested, pH balanced and hypoallergenic, it'll help you unleash that bring-it-on attitude.

Visit summerseve.com for more ideas on feeling your best.

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→ BY JANE BIANCHI

OTC DANGER

If your son gets a migraine at school or your daughter is dealing with killer cramps, they may pop a few pain relievers. The problem is, most teens don't know how much to take—even after reading the box or bottle. Since misusing an OTC medication could cause serious health problems, such as liver failure, make sure your kid knows the proper dosage for all medications.

PLAY IT COOL

Football may be a fall sport, but it doesn't always feel that way when kids are practicing with helmets and padded uniforms in 70- and 80-degree weather. This brings on the risk of heat stroke, which has been blamed for 31 high school football players' deaths since 1995. Ask your kid's coach to go over with the team the symptoms of heat stroke (rapid pulse, unusual behavior and dizziness); limit practices to three hours when it's hot out; schedule breaks at least every 30 minutes and have kids remove equipment; encourage them to drink fluids; and bring an athletic trainer to practices and games in case of an emergency.

BE A PROACTIVE PARENT
If a coach dismisses your concerns, speak with the school's athletic director.

fair play

Video games may be a fun way for your kid to unwind, but excessive play can trigger depression or anxiety, interfere with studying and disrupt healthy eating and exercise behaviors, warns Robert Reynolds, Ph.D., a clinical psychologist in Middletown, Connecticut. "Early in the school year is a good time to take note if your tween or teen is struggling academically, gaining weight or skipping social events. If so, enforce limits."

» FIRST, MAKE HIM EARN IT Don't let him play until he does his homework, eats dinner, rakes the leaves or goes biking with his friends.

» THEN, USE A TIMER Allow no more than an hour of gaming daily. And if he's "just finishing one more level" when the buzzer rings, instead of arguing with him, just subtract that extra time from the next day's clock.

TYPE 1 TEENS

When kids with type 1 diabetes hit their teens they often become less vigilant about monitoring their disease. "Adolescents get busy and feel overwhelmed," says Korey Hood, Ph.D., an associate professor of pediatrics at Cincinnati Children's Medical Center Hospital. "Parents still need to help them out." For example, ask your child to text you her blood glucose numbers at a certain time every day so it becomes a regular habit. And encourage her to check out the Facebook group Children With Diabetes to see what other kids with the disease are talking about.

Photos: (teens) Kevin Dodge/Corbis; (pills) Veer. Illustration: John Ueland.

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WHICH WOULD YOU GIVE YOUR KIDS?

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BAGEL BITES® SNACKS

REAL MOZZARELLA CHEESE:

CHEESE INGREDIENTS: milk, cheese cultures, salt, enzymes.

	Prep	Fat (g)	Trans Fat (g)
Bagel Bites®	**Baked**	**7**	**0**
Totino's® Pizza Rolls®	Pre-Fried	10	1.5

Bagel Bites®

Made with
- Real Cheese
- 8g Protein per serving
- 0g Trans Fat per serving

Nutritional information for Totino's found on product packaging. Comparisons based on 1 serving of Bagel Bites cheese and pepperoni, and 1 serving of Totino's pepperoni Pizza Rolls.
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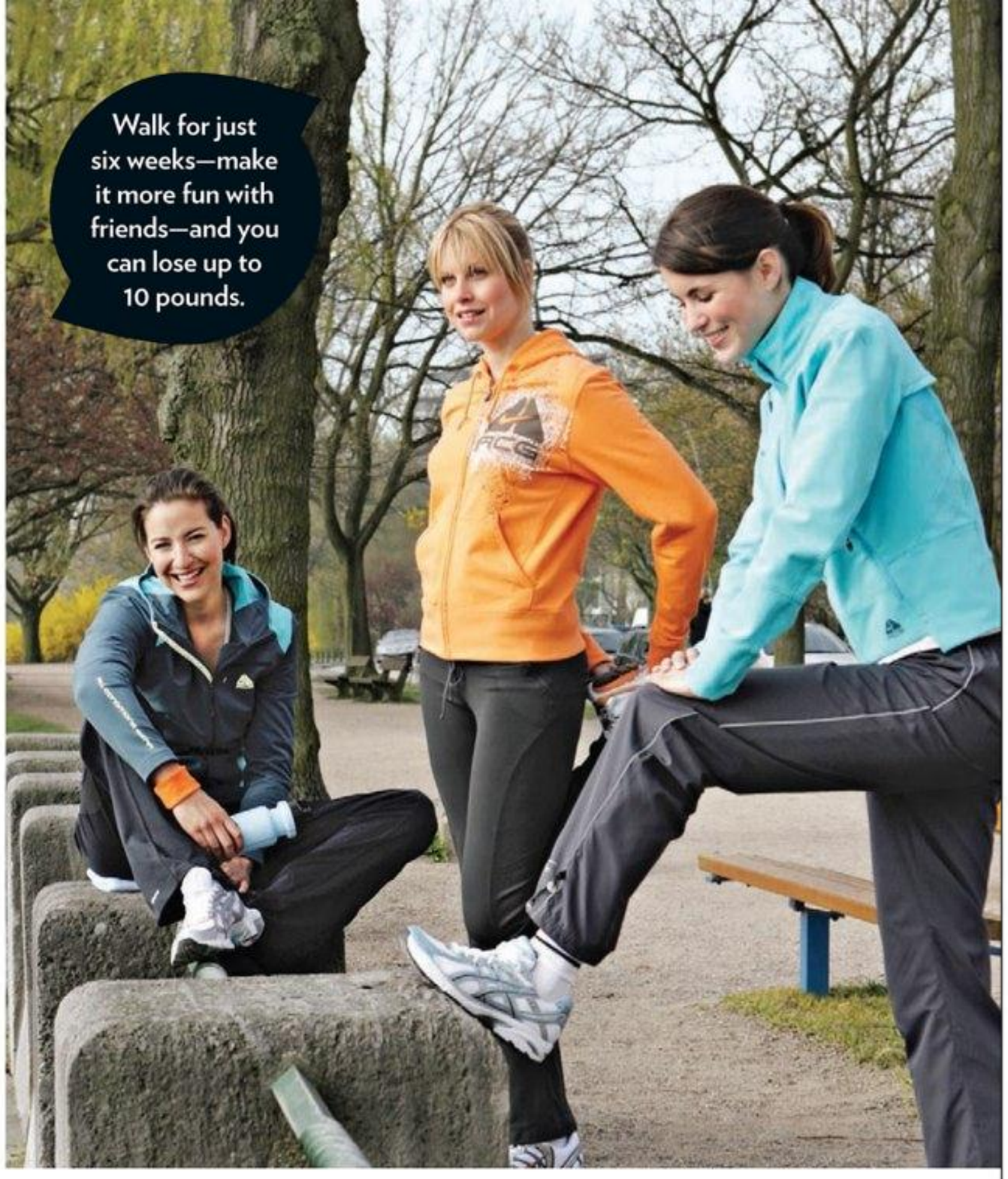
visit mybagelbites.com

→ BY ALLISON BAKER

5K SLIM-DOWN PLAN



Training for a 5K race (3.1 miles) may sound daunting, but it's the perfect motivator for beginners. "Your focus is simply on crossing the finish line on race day," says celebrity trainer Joy Di Palma. The first move: Choose an event and sign up online. October is National Breast Cancer Awareness Month, with hundreds of walks happening across the country. Visit komen.org to find one in your area. Then get into 5K-shape with Joy's easy plan. Make sure to complete the daily-recommended distances (by wearing a pedometer or planning your route ahead of time at mapmyrun.com).

>>> JOY'S STEP-BY-STEP PLAN

WEEK	MON	TUES	WED	THURS	FRI	SAT	SUN
1	REST	.5-mile walk	Cross-train 30 minutes (swim, bike, hike, elliptical, yoga)	1-mile walk	REST	1.5-mile walk	1.5-mile walk
2	REST	1.75-mile walk	Cross-train 30 minutes	1.5-mile walk	REST	1.75-mile walk	1.75-mile walk
3	REST	2-mile walk	Cross-train 30 minutes	2-mile walk	REST	2.5-mile walk	2.5-mile walk
4	REST	2-mile walk	Cross-train 30 minutes	2.5-mile walk	REST	2.5-mile walk	2.75-mile walk
5	REST	2-mile walk	Cross-train 30 minutes	2.5-mile walk	REST	3-mile walk	3-mile walk
6	REST	2.75-mile walk	Cross-train 30 minutes	2.5-mile walk	REST	Rest	5K DAY

WALK TO BEAT BREAST CANCER

DEBORAH PRESSEY, 43, and her daughter, **TAYLOR COOK**, 17, completed this year's two-day, 39-mile Avon Breast Cancer Walk in Houston. "A year ago I was overweight and out of shape," Deborah says. "Taylor and I started with very short walks and did a little more every day until we could go 10 miles. I lost 60 pounds and raised $900 to help fight breast cancer."

>>>>>>>> **IN THE PINK** Have a question about walking? Visit **momster.com/fc/5Kwalk** to ask Joy Di Palma. If she answers yours, we'll send you an outfit from New Balance's Lace Up for the Cure Collection, including jacket, capris, tee and sneakers ($213 value).

Find more issues at magazinesdownload.com

Photo (main): Martina Sandkuehler/Jump Foto.

ONCE-DAILY SPIRIVA helps people with COPD breathe better.

If you have COPD (chronic obstructive pulmonary disease), which includes chronic bronchitis, emphysema or both, rescue inhalers alone may not be enough. You and your doctor could talk about adding once-daily SPIRIVA. Taken every day, SPIRIVA can help you breathe better.

Ask your doctor about SPIRIVA, because it:

- Is the only once-daily, inhaled maintenance prescription treatment for both forms of COPD
- Significantly improves lung function by keeping airways open
- Helps you breathe better for a full 24 hours
- Is not a steroid

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

SPIRIVA® is not for everyone. SPIRIVA® HandiHaler® is a prescription medicine used once every day (a maintenance medicine) to control symptoms of chronic obstructive pulmonary disease (COPD) by relaxing your airways and keeping them open. COPD includes chronic bronchitis, emphysema, or both. SPIRIVA HandiHaler is not a rescue medicine and should not be used for treating sudden breathing problems. Do not swallow SPIRIVA capsules. The contents of the capsule should only be inhaled by mouth using the HandiHaler device. Stop taking SPIRIVA and get medical help right away if your breathing suddenly worsens, your throat, lips, or tongue swells, you get hives, you have vision changes or eye pain, or you have difficulty passing urine or painful urination.

Tell your doctor if you have glaucoma, problems passing urine or an enlarged prostate, as these may worsen with SPIRIVA. Tell your doctor if you have kidney problems or are allergic to milk proteins. Ask your doctor if you are not sure. Also discuss with your doctor all the medicines you take, including eye drops. The most common side effect with SPIRIVA is dry mouth. Others include constipation and trouble passing urine. For a complete list of reported side effects, ask your doctor or pharmacist.

THERE MAY BE MORE YOU CAN DO TO HELP MANAGE YOUR COPD.
Talk to your doctor about lifestyle changes and SPIRIVA.
Also call 1.877.SPIRIVA (774.7482) **or visit SPIRIVA.COM**
Please see Important Patient Information on reverse.

Once-Daily
SPIRIVA® HandiHaler®
(tiotropium bromide inhalation powder)
SV73161 SPC00125

IMPORTANT PATIENT INFORMATION

SPIRIVA® (speh REE vah) HandiHaler®

(tiotropium bromide inhalation powder)

Do NOT swallow SPIRIVA capsules.

After putting the SPIRIVA capsule into the HandiHaler device, breathe in your medicine through your mouth.

<u>Important Information:</u> Do not swallow SPIRIVA capsules. SPIRIVA capsules should only be used with the HandiHaler device. SPIRIVA HandiHaler should only be inhaled by mouth (oral inhalation).

Read the information that comes with your SPIRIVA HandiHaler before you start using it and each time you refill your prescription. There may be new information. This leaflet does not take the place of talking with your doctor about your medical condition or your treatment.

What is SPIRIVA HandiHaler?

SPIRIVA HandiHaler is a prescription medicine that you use one time every day (a maintenance medicine) to control symptoms of chronic obstructive pulmonary disease (COPD). SPIRIVA HandiHaler helps make your lungs work better for 24 hours. SPIRIVA HandiHaler relaxes your airways and helps keep them open. You may start to feel like it is easier to breathe on the first day, but it may take longer for you to feel the full effects of the medicine. SPIRIVA HandiHaler works best and may help make it easier to breathe when you use it every day.

SPIRIVA HandiHaler also reduces the likelihood of flare-ups and worsening of COPD symptoms (COPD exacerbations). A COPD exacerbation is defined as an increase or new onset of more than one COPD symptom such as cough, mucus, shortness of breath, and wheezing that requires medicine beyond your rescue medicine.

SPIRIVA HandiHaler is **not** a rescue medicine and should not be used for treating sudden breathing problems. Your doctor may give you other medicine to use for sudden breathing problems.

SPIRIVA HandiHaler has not been studied in children.

Who should not take SPIRIVA HandiHaler?

Do not use SPIRIVA HandiHaler if you:

- are allergic to tiotropium. See the end of this leaflet for a complete list of ingredients.
- have had an allergic reaction to ipratropium (Atrovent®).

Allergic reactions may include itching, rash, or swelling of the lips, tongue or throat (trouble swallowing).

What should I tell my doctor before using SPIRIVA HandiHaler?

Before taking SPIRIVA HandiHaler, tell your doctor about all your medical conditions, including if you:

- have kidney problems.
- have glaucoma. SPIRIVA HandiHaler may make your glaucoma worse.
- have an enlarged prostate, problems passing urine, or a blockage in your bladder. SPIRIVA HandiHaler may make these problems worse.
- are pregnant or plan to become pregnant. It is not known if SPIRIVA HandiHaler could harm your unborn baby.
- are breast-feeding or plan to breast feed. It is not known if SPIRIVA HandiHaler passes into breast milk. You and your doctor will decide if SPIRIVA HandiHaler is right for you while you breast-feed.
- have a severe allergy to milk proteins. Ask your doctor if you are not sure.

Tell your doctor about all the medicines you take, including prescription and non-prescription medicines and eye drops, vitamins, and herbal supplements. Some of your other medicines or supplements may affect the way SPIRIVA HandiHaler works. SPIRIVA HandiHaler is an anticholinergic medicine. You should not take other anticholinergic medicines while using SPIRIVA HandiHaler, including ipratropium. Ask your doctor or pharmacist if you are not sure if one of your medicines is an anticholinergic.

Know the medicines you take. Keep a list of your medicines with you to show your doctor and pharmacist when you get a new medicine.

How should I take SPIRIVA HandiHaler?

- Use SPIRIVA HandiHaler exactly as prescribed. Use SPIRIVA HandiHaler one time every day.
- Read the "Patient's Instructions for Use" that comes with your prescription before you use SPIRIVA HandiHaler. Talk with your doctor if you do not understand the instructions.
- **Do not swallow SPIRIVA capsules.**
- **Only use SPIRIVA capsules with the HandiHaler device.**
- **Do not use the HandiHaler device to take any other medicine.**
- SPIRIVA HandiHaler comes as a powder in a SPIRIVA capsule that fits the HandiHaler device. Each SPIRIVA capsule, containing only a small amount of SPIRIVA powder, is one full dose of medicine.
- Separate one blister from the blister card. Then take out one of the SPIRIVA capsules from the blister package right before you use it.
- After the capsule is pierced, take a complete dose of SPIRIVA HandiHaler by breathing in the powder by mouth two times, using the HandiHaler device (take 2 inhalations from one SPIRIVA capsule). See the "Patient's Instructions for Use" that comes with your prescription.
- Throw away any SPIRIVA capsule that is not used right away after it is taken out of the blister package. Do not leave the SPIRIVA capsules open to air; they may not work as well.
- If you miss a dose, take it as soon as you remember. Do not use SPIRIVA HandiHaler more than one time every 24 hours.
- If you use more than your prescribed dose of SPIRIVA HandiHaler, call your doctor or a poison control center.

What should I avoid while using SPIRIVA HandiHaler?

Do not let the powder from the SPIRIVA capsule get into your eyes. Your vision may get blurry and the pupil in your eye may get larger (dilate). If this happens, call your doctor.

What are the possible side effects of SPIRIVA HandiHaler?

SPIRIVA HandiHaler can cause serious side effects. If you get any of the following side effects, stop taking SPIRIVA HandiHaler and get medical help right away.

- **Allergic reaction.** Symptoms may include: itching, rash, swelling of the lips, tongue, or throat (trouble swallowing).
- **Sudden narrowing and blockage of the airways into the lungs (bronchospasm).** Your breathing suddenly gets worse.
- **New or worsened increased pressure in the eyes (acute narrow-angle glaucoma).** Symptoms of acute narrow-angle glaucoma may include: eye pain, blurred vision, seeing halos (visual halos) or colored images along with red eyes.
- **New or worsened urinary retention.** Symptoms of blockage in your bladder and/or enlarged prostate may include: difficulty passing urine, painful urination.

Other common side effects with SPIRIVA HandiHaler include:

- upper respiratory tract infection
- dry mouth
- sinus infection
- sore throat
- non-specific chest pain
- urinary tract infection
- indigestion
- runny nose
- constipation
- increased heart rate
- blurred vision

These are not all the possible side effects with SPIRIVA HandiHaler. Tell your doctor if you have any side effect that bothers you or that does not go away.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How do I store SPIRIVA HandiHaler?

- **Do not store SPIRIVA capsules in the HandiHaler device.**
- Store SPIRIVA capsules in the sealed blister package at room temperature between 68°F-77°F (20°C-25°C).
- Keep SPIRIVA capsules away from heat and cold (do not freeze).
- Store SPIRIVA capsules in a dry place. Throw away any unused SPIRIVA capsules that have been open to air.

Ask your doctor or pharmacist if you have any questions about storing your SPIRIVA capsules.

Keep SPIRIVA HandiHaler, SPIRIVA capsules, and all medicines out of the reach of children.

General information about SPIRIVA HandiHaler

Medicines are sometimes prescribed for purposes other than those listed in Patient Information leaflets. Do not use SPIRIVA HandiHaler for a purpose for which it has not been prescribed. Do not give SPIRIVA HandiHaler to other people even if they have the same symptoms that you have. It may harm them.

For more information about SPIRIVA HandiHaler, talk with your doctor. You can ask your doctor or pharmacist for information about SPIRIVA HandiHaler that is written for health professionals.

For more information about SPIRIVA HandiHaler, you may call Boehringer Ingelheim Pharmaceuticals, Inc. at 1-800-542-6257 or (TTY) 1-800-459-9906.

What are the ingredients in SPIRIVA HandiHaler?

Active ingredient: tiotropium
Inactive ingredient: lactose monohydrate

What is COPD (Chronic Obstructive Pulmonary Disease)?

COPD is a serious lung disease that includes chronic bronchitis, emphysema, or both. Most COPD is caused by smoking. When you have COPD, your airways become narrow. So, air moves out of your lungs more slowly. This makes it hard to breathe.

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SPIRIVA® is covered by U.S. Patent Nos. RE38,912, RE39,820, 5,478,578, 6,777,423, 6,908,928, 7,070,800, and 7,309,707 with other patents pending. The HandiHaler® device is covered by U.S. Design Patent No. D355,029 with other patents pending.

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Get Smart About Breakfast

Nutritionists everywhere are talking about the IMPORTANCE OF BREAKFAST.

But do you know why?

- Skipping breakfast makes you hungrier and more likely to grab a high calorie, fatty snack mid-morning.
- A nutritional boost first thing in the morning helps your body get energized for the day ahead.
- Skipping breakfast is associated with other lifestyle factors such as smoking, infrequent exercise, dieting and concerns about body weight.
- Scientific evidence suggests that eating breakfast on a regular basis can help reduce health risk factors for becoming overweight or obese, coronary heart disease, hypertension, elevated cholesterol, type 2 diabetes and some cancers.

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NEW Cheesy Scramble with Hashbrowns

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NOW WHAT?

NEXT STEPS AFTER A BREAST CANCER DIAGNOSIS

BY JANIS GRAHAM

ILLUSTRATIONS BY EVA TATCHEVA

No matter what you may do to prepare yourself, being told that a lump is indeed breast cancer is always a shock. And before you have time to think straight, you're plunged into a sea of new information and difficult decisions. Although you may feel very alone, you're not: The road to good treatment is well traveled. Our guide will steer you through these tough times.

STEP 1 » SEE A SURGEON

After a positive biopsy the vast majority of women need surgery to completely remove the cancer. You'll usually be referred to a cancer surgeon—also known as a surgical oncologist. Oftentimes the radiologist or your primary care physician will suggest a surgeon you should see. More than 50% of new breast cancer patients rely on this recommendation, as it opens doors and ensures you get an appointment quickly, says Leslie Montgomery, M.D., chief, division of breast surgery at Montefiore-Einstein Center for Cancer Care in the Bronx, New York. Women who select their own surgeon usually do it because of a doctor's reputation or they want to be treated at a certain hospital.

Don't spend too much time debating whom to meet with first. You may ultimately switch to another surgeon (because you want someone more qualified or aren't confident about the treatment plan outlined by doctor number one). Be aware that you'll be hit with a load of information at this meeting. If you arrive prepared you'll feel less overwhelmed. What to do beforehand:

Enlist a friend. At every medical meeting you'll need a second set of ears. "The average patient hears only about half of what's said, so it's critical to bring someone along to hear the other half," says breast specialist Katherine B. Lee, M.D., assistant professor of surgery at the Cleveland Clinic Breast Center in Ohio. Whether it's your husband, sister or friend, this person should be a careful and calm listener, a good note taker, and, if possible, able to accompany you on most appointments.

Learn the cancer basics. Most likely you've been told what type of cancer you have by the radiologist and were given radiology and pathology reports. If not, ask for copies. The surgeon should carefully review these results with you, since they're the key to deciding on treatments. Familiarize yourself with these common terms before your appointment:

➜ *"Invasive" versus "ductal carcinoma in situ."* Most breast cancers are invasive, which means the cells have broken out of the milk ducts or glands where they started; ones that are "in situ" are confined and are the earliest form of breast cancer, with the best prognosis.

➜ *Hormone receptor status.* Some breast cancer cells have receptors that can be activated by estrogen, progesterone or both. You'll be a candidate for hormone-blocking agents like tamoxifen or raloxifene (for post-menopausal women) if your cells have these receptors.

➜ *HER2-positive or -negative.* About 20% of all breast cancers overproduce a protein known as HER2. These tumors tend to grow and spread fast, so you may need more aggressive treatment.

Compile your questions. Keep a list of all the things you want clarified and bring it to the appointment. One question to include: "Whom can I call if I have more questions after this appointment?" Don't be surprised if you can't get all the answers yet. For instance, a surgeon usually can't tell you how much a cancer has spread until after your operation.

Insurance essentials

The fine print on a health insurance policy is probably the last thing you want to think about now, but it's arguably the first thing you should give your attention to. Here's how to find out how much coverage you have—and what to do about any gaps.

Pick up the phone. You could read every word of your policy, but it's easier to speak with someone at your insurance company who will explain what benefits you have. Get details on procedure pre-approval rules and whether the policy pays the cost of a second (or even third) opinion. If you think you might need more insurance, ask if it is available. Keep records of what was said and when, and with whom you talked.

Don't be denied. If an insurance claim is turned down, find out why. Ask to speak to a supervisor if you're not satisfied with the information you're given by customer service. Enlist a doctor's help if fees, charges or procedures are questioned. Most physicians have staff who have experience working with insurance companies. Your hospital or cancer center may also have patient representatives—professionals hired to act as advocates in case of a dispute with an insurance company.

Ask for assistance with bills. If you're underinsured, try to negotiate fees with your doctors. Some will "forgive" the amount not covered by your plan. Many hospitals will work with you to make special payment arrangements if you let them know about your situation. The Patient Advocate Foundation (copays.org) and CancerCare (cancercare.org) have programs to provide financial assistance for cancer patients, plus they can direct you to a variety of additional resources.

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STEP 2 » DECIDE IF YOU NEED A SECOND OPINION

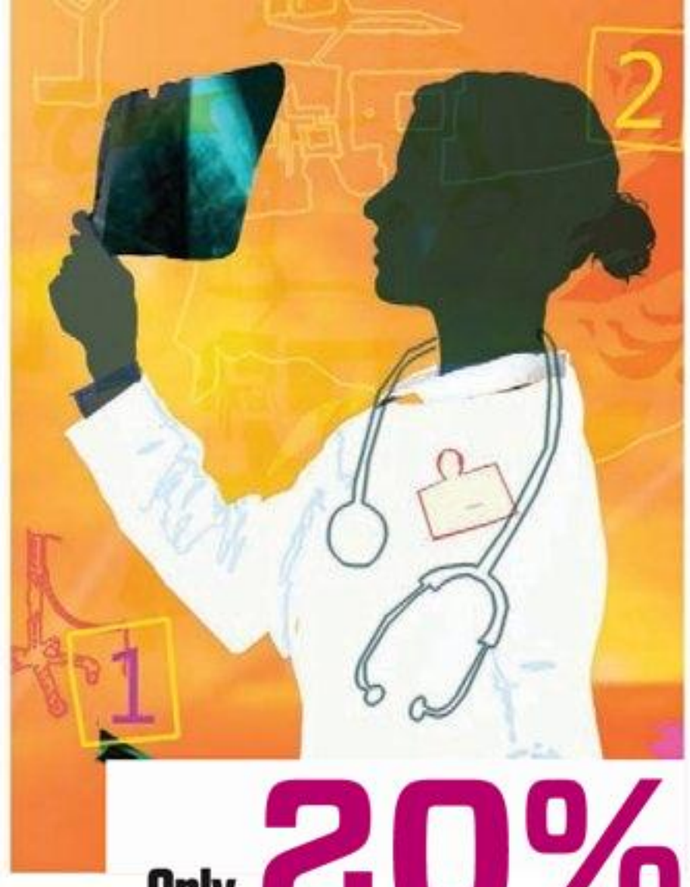
We've all heard the mantra: Get a second opinion. Still, only about 20% of women seek one, according to a recent study of almost 2,000 breast cancer patients. Even more surprising, many experts think that's okay: "It's outdated to insist a second opinion is always essential. Today, if a woman is being treated at a top-notch cancer center and she feels good about the specialists she's seeing, a second opinion just may not be necessary," says Megan Baker Ruppel, M.D., medical director of the comprehensive breast care program at Hollings Cancer Center at the Medical University of South Carolina in Charleston.

Consider sticking with one opinion if...

➜ *Your surgeon is associated with a National Cancer Institute–designated comprehensive cancer center.* These centers offer a broad range of up-to-date treatment options, psychological support services, and complementary and alternative therapies. And, most important, they foster close cooperation and communication among all the members of your cancer care "team," which may include a surgical oncologist (your surgeon); medical oncologist (the doctor who oversees chemo, hormone therapy and all other meds); radiation oncologist (administers radiation therapy); pathologist (prepares the lab reports on your tissue samples); and plastic surgeon (performs breast reconstruction). Search "NCI-Designated Cancer Centers" at cancer.gov or call 1-800-4-Cancer for a nationwide list. You can probably safely skip seeing more doctors if you feel confident you have all the information you need to choose a course of treatment.

But you may need a second opinion if...

➜ *You'll be treated at a local hospital that doesn't specialize in breast cancer.* Many community-based hospitals do have excellent multidisciplinary teams, says Dr. Baker Ruppel. One of your doctors (usually your surgeon) helps connect you with the other physicians needed for your treatment. These specialists have weekly conferences to discuss breast cancer cases, so you're assured your treatment plan is being assessed by multiple experts. It's a good sign if the team practices at a hospital with a cancer program accredited by the American College of Surgeons (click "Find an Accredited Cancer Program Near You" at facs.org/cancer). But if your local doctors treat many other cancer types as well, consider traveling to a larger comprehensive center affiliated with the NCI or to an academic medical center for a consultation. Chances are it will help confirm the information you've heard. If the second opinion happens to differ, you may decide to switch doctors, go for a third opinion or use the new advice to guide the care you receive at your local hospital.



Only 20% of women diagnosed with breast cancer seek a second opinion.

A second opinion is strongly encouraged if...

➜ *The surgeon you've seen doesn't work with a team and doesn't practice at a hospital with an accredited cancer program.* Several studies suggest that breast cancer patients have a higher likelihood of survival if they are treated by experienced surgeons at hospitals with a large volume of breast cancer patients.

➜ *You're confused about the approach being discussed.* You should not feel pressured by your doctor to choose a particular course of action, be offered only one type of treatment, or have doubts about any aspect of the diagnosis or treatment plan you've been presented. "In these circumstances there is no question that it's in your best interest to get a second opinion," says Dr. Lee. "You need to be confident that you're receiving the best care possible." The American Cancer Society (cancer.org or 1-800-227-2345) can provide referrals to comprehensive cancer centers near you.

"I needed to be sure my treatment was right."

When Sarita Joy Jordan, a 41-year-old mother of four from Philadelphia, was diagnosed with breast cancer five years ago, she decided to seek a second opinion right away. "I didn't want to simply go along with what my doctor said." After doing a lot of research on the Internet, she traveled to a large cancer center for a consultation. "The place had none of the intimacy of the hospital where I first went, plus the doctors were accompanied by medical students, all of whom wanted a chance to examine my breast. I wasn't comfortable with that." The second opinion she received confirmed everything her first doctor had recommended (lumpectomy followed by eight weeks of chemo, 30 rounds of radiation and five years of hormone therapy), so she decided to return to her original doctor's care.

"I don't think getting the second opinion was a mistake, even though it was time-consuming and not the best experience," says Sarita. "It helped me accept that I really had cancer—I secretly believed it might be a mistake—and even more important, it gave me confidence in the treatment I chose."

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STEP 3 » CONSIDER YOUR TREATMENT CHOICES

Breast cancer treatment isn't "one size fits all," which means you may be faced with choices to make, both before and after surgery. Keep in mind, there's rarely a need to rush things, says Dale Collins Vidal, M.D., professor of surgery at Dartmouth Medical School in Lebanon, New Hampshire. "In most cases you can safely take a few weeks to mull over your options, get more advice and develop a plan you feel confident with." The major decisions you may encounter:

"I kept notes on everything."

Two years ago 44-year-old Debbie Blevins, a mother of two teenagers from Louisville, Kentucky, had a breast-sparing lumpectomy, then chemo and radiation. From start to finish her treatment took eight months—and throughout the entire time she carried a big notebook with her everywhere. In it she wrote lists of questions to ask doctors, took notes on her appointments and jotted down the names of all the drugs she was on. "I also wrote down every gift and meal I received," says Debbie. "I wanted to remember how wonderful and supportive everyone was."

Debbie says she wasn't good at record-keeping before being diagnosed with breast cancer. But the notebook helped her stay sane. "I was so stressed, and it was a huge help to have everything in one place," she says. In addition, Debbie had a plastic bin at home filled with medical information she received from doctors, a folder for receipts and bills, and a photo album that chronicled her treatment, including the day her husband shaved her head. "I often look back and see what a difference a year has made!"

Before surgery

Lumpectomy versus mastectomy. A lumpectomy (breast-conserving surgery) makes sense if your tumor is tiny and limited to one area, since the results won't be disfiguring. When combined with radiation afterward, women with relatively small breast cancers who have a lumpectomy are just as likely to be alive and disease-free 20 years later as women treated with a mastectomy (the entire breast is removed), according to two large studies. Still, a mastectomy might be a better choice if a lot of tissue (especially if in different areas) needs to be taken. And in many instances you won't need radiation if you have a mastectomy.

In most cases you don't need to rush into treatment and can safely take a few weeks to mull over your options, get more advice and develop a plan.

Reconstructive surgery. If you decide to have a mastectomy, think about whether you want surgery to rebuild your breast—by law, this is a benefit your health insurer must cover. Immediate breast reconstruction often spares you a second operation and has the best cosmetic results. To learn more about the newest reconstruction options, including nipple-sparing procedures, search "Breast Reconstruction After Mastectomy" at cancer.org.

After surgery

Chemotherapy. Undergoing chemo to lower the risk of a cancer comeback is a given for most women, unless you have early stage (I or II) estrogen receptor–positive breast cancer that has not spread to the lymph nodes (and you're undergoing hormone therapy). In this scenario your oncologist will order an Oncotype DX test, which analyzes the activity of different genes (from a tissue sample) that control the growth of cancer cells. Test results are reported as a "Recurrence Score" between 0 and 100. The lower your score, the less likely the cancer is to recur within 10 years of your initial diagnosis; higher scores indicate you would benefit from chemo. The trickiest score is between 18 and 31 because it doesn't provide a clear signal as to what the best course of action is.

Find more issues at magazinesdownload.com

Always running to the bathroom?

Maybe your internal plumbing isn't working like it should.
This quiz can help you talk to your doctor about it.

	YES	NO
When I go out, I always make sure there's a bathroom nearby.	☐	☐
Once I get the sudden urge to go, I can't wait.	☐	☐
I wear pads sometimes because I worry I might accidentally leak.	☐	☐
I've had enough, and I'm ready to do something about my urges and leaks.	☐	☐

If you answered "Yes" to any of these, tear out this quiz and talk to your doctor about your results. Only your doctor can determine if you have overactive bladder. Once-daily VESIcare is proven to reduce frequent, sudden urges and leaks.* That's because it can help control your bladder muscle, day and night. So ask your doctor about taking care with VESIcare.

**Results may vary.*

USE AND DOSE

VESIcare is for urgency, frequency, and leakage (overactive bladder). The recommended dose of VESIcare is 5 mg once daily. If the 5-mg dose is well tolerated, your doctor may increase the dose to 10 mg once daily.

IMPORTANT SAFETY INFORMATION

VESIcare is not for everyone. If you have certain stomach or glaucoma problems, or trouble emptying your bladder, do not take VESIcare. VESIcare may cause allergic reactions that may be serious. If you experience swelling of the face, lips, throat or tongue, stop taking VESIcare and get emergency help. Tell your doctor right away if you have severe abdominal pain, or become constipated for three or more days. VESIcare may cause blurred vision, so use caution while driving or doing unsafe tasks. Common side effects are dry mouth, constipation, and indigestion.

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Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Patient Information
VESIcare® – (VES-ih-care)
(solifenacin succinate)

Read the Patient Information that comes with VESIcare before you start taking it and each time you get a refill. There may be new information. This leaflet does not take the place of talking with your doctor or other healthcare professional about your condition or treatment. Only your doctor or healthcare professional can determine if treatment with VESIcare is right for you.

What is VESIcare?
VESIcare is a prescription medicine used in adults to treat the following symptoms due to a condition called overactive bladder:
- Having to go to the bathroom too often, also called "urinary frequency"
- Having a strong need to go to the bathroom right away, also called "urgency"
- Leaking or wetting accidents, also called "urinary incontinence"

VESIcare has not been studied in children.

What is overactive bladder?
Overactive bladder occurs when you cannot control your bladder contractions. When these muscle contractions happen too often or cannot be controlled you can get symptoms of overactive bladder, which are urinary frequency, urinary urgency, and urinary incontinence (leakage).

Who should NOT take VESIcare?
Do not take VESIcare if you:
- Are not able to empty your bladder (also called "urinary retention")
- Have delayed or slow emptying of your stomach (also called "gastric retention")
- Have an eye problem called "uncontrolled narrow-angle glaucoma"
- Are allergic to VESIcare or any of its ingredients. See the end of this leaflet for a complete list of ingredients

What should I tell my doctor before starting VESIcare?
Before starting VESIcare tell your doctor or healthcare professional about all of your medical conditions including if you:
- Have any stomach or intestinal problems or problems with constipation
- Have trouble emptying your bladder or you have a weak urine stream
- Have an eye problem called narrow-angle glaucoma
- Have liver problems
- Have kidney problems
- Are pregnant or trying to become pregnant (It is not known if VESIcare can harm your unborn baby)
- Are breastfeeding (It is not known if VESIcare passes into breast milk and if it can harm your baby. You should decide whether to breastfeed or take VESIcare, but not both)

Before starting on VESIcare, tell your doctor about all the medicines you take including prescription and nonprescription medicines, vitamins, and herbal supplements. While taking VESIcare, tell your doctor or healthcare professional about all changes in the medicines you are taking including prescription and nonprescription medicines, vitamins and herbal supplements. VESIcare and other medicines may affect each other.

How should I take VESIcare?
Take VESIcare exactly as prescribed. Your doctor will prescribe the dose that is right for you. Your doctor may prescribe the lowest dose if you have certain medical conditions such as liver or kidney problems.
- You should take one VESIcare tablet once a day
- You should take VESIcare with liquid and swallow the tablet whole
- You can take VESIcare with or without food
- If you miss a dose of VESIcare, begin taking VESIcare again the next day. Do not take 2 doses of VESIcare the same day
- If you take too much VESIcare or overdose, call your local Poison Control Center or emergency room right away

What are the possible side effects with VESIcare?
VESIcare may cause allergic reactions that may be serious. Symptoms of a serious allergic reaction may include swelling of the face, lips, throat or tongue. If you experience these symptoms, you should stop taking VESIcare and get emergency medical help right away.
The most common side effects with VESIcare are:
- Blurred vision. Use caution while driving or doing dangerous activities until you know how VESIcare affects you
- Dry mouth
- Constipation. Call your doctor if you get severe stomach area (abdominal) pain or become constipated for 3 or more days
- Heat prostration. Heat prostration (due to decreased sweating) can occur when drugs, such as VESIcare, are used in a hot environment

Tell your doctor if you have any side effects that bother you or that do not go away.
These are not all the side effects with VESIcare. For more information, ask your doctor, healthcare professional or pharmacist.

How should I store VESIcare?
- Keep VESIcare and all other medications out of the reach of children
- Store VESIcare at room temperature, 50° to 86°F (15° to 30°C). Keep the bottle closed
- Safely dispose of VESIcare that is out of date or that you no longer need

General information about VESIcare
Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Do not use VESIcare for a condition for which it was not prescribed. Do not give VESIcare to other people, even if they have the same symptoms you have. It may harm them.
This leaflet summarizes the most important information about VESIcare. If you would like more information, talk with your doctor. You can ask your doctor or pharmacist for information about VESIcare that is written for health professionals. You can also call (800) 727-7003 toll free, or visit www.VESIcare.com

What are the ingredients in VESIcare?
Active ingredient: solifenacin succinate
Inactive ingredients: lactose monohydrate, corn starch, hypromellose 2910, magnesium stearate, talc, polyethylene glycol 8000 and titanium dioxide with yellow ferric oxide (5 mg VESIcare tablet) or red ferric oxide (10 mg VESIcare tablet)

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Lean on Me

When Tracie Metzger learned she had breast cancer 10 years ago she started looking for other women who would understand what she was going through.

Tracie felt a strong need to connect with women who had also been recently diagnosed. And since she was only 30, and her two oldest children, Trey, now 14, and Grace, 10, were so little, she particularly wanted to bond with other young moms. "I was worrying, 'Am I going to be around for these kids?'" she recalls. She reached out to two women who became her lifeline for the next year: Jamie Hoffpauir and Dawn Harvey (whom she'd met through her oncologist). All three were in their early 30s, all were moms and all had been diagnosed within months of each other.

Everyday Help Tracie, Jamie and Dawn spoke on the phone often and went out to dinner every couple of weeks. When they were going through chemo, their bald heads and baseball hats attracted attention, but they didn't care. The emotional support and practical advice they exchanged was more than worth it. "Together we'd let out our deepest fears and concerns," says Tracie. "Things you didn't want to tell your mom or your husband because you didn't want them to worry." The friends were also a source of invaluable advice for one another. When Tracie dropped from 125 pounds to 102 during chemo, her friends recommended protein shakes for gaining back the weight. And they knew the right kind of mouthwash to help with mouth sores caused by her treatments. "We shared little everyday tips that you don't get from the Internet or from your doctor," says Tracie.

"There are things you don't want to tell your mom or husband because you don't want them to worry."

Reaching Others The three realized that their relationship was special, and when they finished treatment they invited other women to join them. "It was an informal mom's night, but we all just happened to have breast cancer," says Tracie. "Sometimes we'd talk about cancer for two minutes and then move on. We tried to keep it light." The group launched pinkribbongirls.org for women who couldn't make it to meetings and began providing meals and housecleaning to those undergoing treatment. Today, Pink Ribbon Girls has 3,000 members in 48 states who turn to one another for help in finding a doctor, deciding between a lumpectomy and a mastectomy, or figuring out what to tell their children, whether they're toddlers or teens.

Right for You Support groups abound, but finding the one that fits your needs isn't necessarily easy, says Tracie. "A lot of people start with their church, the local wellness center or the American Cancer Society," she says. "If you feel like you need something moderated, these are the places to look." Or search out an organization with a mission that appeals to you. The Young Survival Coalition, for example, focuses on advocacy, while Susan G. Komen for the Cure concentrates on research. Getting involved can be an important step in recovery. Tracie recalls a new Pink Ribbon Girls member who was going through treatment. "Within a month somebody else was diagnosed and she was already able to act as a role model. She found that so empowering," says Tracie. "And anything that makes you feel strong is so important because when you're dealing with this, you're petrified. You don't know what to say to your kids, you don't know how your husband's going to deal. Being able to connect with someone who's just like you is the most wonderful gift."

Find more issues at magazinesdownload.com

External versus internal radiation therapy. External beam radiation, which is the most common type, is administered from a machine outside the body to the breast from which the cancer is being removed. Typically, you're given treatments five days a week for about six weeks. With internal therapy (a widely used type is MammoSite), radioactive seeds or pellets are placed directly into the breast tissue next to the cancer. This treatment is much faster—it's twice a day for five days. Not everyone's a candidate, but if you are, be aware that internal radiation is newer, so the evidence is still incomplete (although promising) as to whether it reduces the chances of a recurrence as much as the external version.

Hormone or targeted therapy. If your cancer is positive for estrogen and/or progesterone receptors, you can increase the odds your cancer won't return by 23% by taking anti-hormone pills such as tamoxifen, letrozole or anastrozole. But these meds can cause fatigue, hot flashes and mood swings. In fact, up to 50% of women quit taking them sooner than recommended. In some cases you may be able to switch to another type of hormone therapy if you're experiencing side effects. Work with your oncologist to find a regimen you can tolerate. If you have early stage HER2-positive cancer, you'll need to decide whether to take the drug trastuzumab; it can lower your risk of a recurrence by 52% when used in combination with chemotherapy, but it may trigger serious heart complications in some women. ●

MOMster

Reach out to other moms dealing with cancer at momster.com/fc/breastcancer

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If pregnant or nursing please consult with your doctor before use.

The Anti-Cancer Diet

Keep the whole family healthy by adding these superfoods to your shopping list.

BERRIES / serving = 1 cup

Berries contain antioxidants that reduce and repair the kind of damage to cells that can lead to cancer. When they're not in season, choose frozen berries since they're typically just as healthy as fresh.

GARLIC / serving = 1 clove or 1 teaspoon minced

According to the American Institute for Cancer Research, garlic may lower your risk for colon cancer with compounds that block tumor formation and cancer cell growth in the colon.

SOY / serving = 1 cup soy milk, 4 ounces tofu or ½ cup shelled edamame

Soy may lower the risk for breast and prostate cancers. You'll get more benefit from whole soy (edamame, tofu and soy milk) than from foods with processed soy protein (energy bars), says Alice Bender, R.D., a dietician with the American Institute for Cancer Research. One caution: Some women with breast cancer should avoid soy—talk with your doctor.

TEA / serving = 1 cup

Tea has antioxidants called catechins that may block certain enzymes that lead to cancer. In animal research, stomach, liver and skin tumors shrank in mice fed green or black tea. Steeping tea for at least five minutes releases the most antioxidants.

FATTY FISH / serving = 3 ounces

Several studies have indicated that the mega-healthy components of fish—like omega-3 fatty acids—guard against cancer (just as they do against cardiovascular disease), but experts stress that more trials are necessary. Fatty fish like salmon, mackerel, herring, lake trout, sardines and albacore tuna are high in omega-3s.

NUTS / serving = ¼ cup

All nuts may prevent cancer. Peanuts in particular have been linked to a lower rate of endometrial and colorectal cancers in women. The protective benefits of nuts most likely come from antioxidant compounds like folic acid and magnesium, according to a research review in the *American Journal of Clinical Nutrition*.

By Sally Kuzemchak, M.S., R.D.

Photography by Levi Brown

"What you eat and how much you consume makes a difference when it comes to cancer," says Colleen Doyle, R.D., director of nutrition and physical activity for the American Cancer Society. The first step: Limit your intake of sweets and unhealthy fats. Focus on the term "occasional treat," with the stress on occasional. Step two: Incorporate the following foods into your everyday meals and snacks—pick at least two a day for a week's worth of protection. They're nutritional powerhouses—and have all shown promise in the fight against cancer.

Food styling: Sara Neumeier.

Find more issues at magazinesdownload.com

FLAXSEED / serving = 1 to 2 tablespoons, ground

Researchers say the lignans, compounds that act like antioxidants, in this high-fiber seed may help reduce the growth and spread of breast cancer. Grind flaxseed before eating (or buy ground instead of whole) to better absorb the nutrients.

CRUCIFEROUS VEGETABLES / serving = ½ cup

Brussels sprouts, cauliflower, cabbage and broccoli pack sulfur-containing compounds that may inhibit the growth of cancer cells. Studies have linked them to lower rates of lung, liver, colon, breast and endometrial cancers.

SWEET POTATOES / serving = 1 medium potato

Beta-carotene, the antioxidant that gives sweet potatoes (as well as carrots, cantaloupe and mangoes) their orange color, may help prevent the damage to cell membranes that leads to cancer.

LOW-FAT DAIRY / serving = 1 cup

In recent research premenopausal women who had at least one serving a day of low-fat yogurt or milk reduced their breast cancer risk. Most dairy products also contain vitamin D, which has been associated with lower risk for pancreatic and colorectal cancers.

GRAPES / serving = 1 cup

Red and purple grapes contain the same disease-fighting compound found in wine—resveratrol—which has been shown to slow the growth of cancer cells and block tumor formation in the liver, stomach and breast. Lycopene, the pigment that gives grapes their color, also boasts cancer-fighting properties.

LEAFY GREENS / serving = 1 to 2 cups raw

Dark-green leafy vegetables are loaded with folate, a B vitamin that helps repair damaged DNA that's vulnerable to cancer. Some studies suggest it may guard against GI cancers in particular—and possibly breast cancer too.

BEANS / serving = ½ cup cooked

Having meatless meals can slash your risk for cancer, so consider eating more beans (such as black, pinto, lima and kidney) as well as other legumes (like lentils and black-eyed peas). Postmenopausal women whose diets contain lots of beans have lower rates of invasive breast cancer.

WHOLE GRAINS / serving = 1 slice bread, 1 cup cereal, or ½ cup brown rice or pasta

Compared with refined grains (like white bread and regular pasta), whole grains have much more fiber, which may protect against colorectal cancers because it helps move food through your digestive system faster. At least half of your daily grain servings should be whole grains.

NON-NEGOTIABLES

Strive to add cancer-fighting foods to your diet while keeping in mind these daily recommendations:

EVERY DAY CONSUME AT LEAST

- 3 to 4 servings of whole grains
- 3 servings of fruit
- 4 servings of vegetables
- 8 cups of water

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A handful of heart-smart, nutrient-rich California Almonds, with 6 grams of protein power can be just the lift you need. It can even help you maintain healthy cholesterol. Learn more about the power of a handful at **AlmondBoard.com**

Good news about almonds and heart health Scientific evidence suggests, but does not prove, that eating 1.5 ounces per day of most nuts, such as almonds, as part of a diet low in saturated fat and cholesterol may reduce the risk of heart disease. One serving of almonds (28g) has 13g of unsaturated fat and only 1g of saturated fat.

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FOOD

→ HEALTHY MEALS → COMFORT FOOD → SLOW COOKER IDEAS

Photo: Louise Lister-Stockfood Munich/Stockfood.

A Perfect Pear

Help yourself to the Bartletts that are stacked in stores now—they're high in fiber, low in calories and deliciously sweet. Ripen at room temperature until slightly yellow, then store in the fridge up to a week. For a simple dessert: Place 4 cored pear halves, cut-side up, in a baking dish. Stir together ¼ cup light-brown sugar, 2 tbsp chopped walnuts and ½ tsp pumpkin pie spice. Fill each pear with an equal amount of mixture. Cover and bake at 350° for 40 minutes. Serve with vanilla frozen yogurt.

→ BY ALLISON BAKER

Breakfast Club

The right morning meal can boost a kid's brainpower. Stock up on these ideas for busy weekdays—and whip up this amazing recipe on leisurely weekends.

On-the-go for Monday to Friday

- → Evol breakfast burritos, grocery stores, $3
- → Kellogg's All-Bran Original cereal, grocery stores, $4
- → Quaker Granola Bites, grocery stores, $3
- → Archer Farms Simply Balanced Granola Bars, Target, $2.50
- → Market Pantry Low-Sugar Maple & Brown Sugar Instant Oatmeal, Target, $2

Irresistible when you have a little more time

STRAWBERRY FRENCH TOAST

- 1 pack (8 ounces) softened neufchâtel cheese
- 2 tablespoons sugar
- 2 tablespoons light sour cream
- ½ teaspoon vanilla
- 2 cups chopped strawberries
- 8 slices country white bread (such as Arnold)
- 4 eggs
- 1 teaspoon pumpkin pie spice
- 1 tablespoon butter

① Beat together softened cream cheese, sugar, sour cream and vanilla. Fold in strawberries.

② Dip bread into beaten eggs and pumpkin pie spice; fry on a hot buttered griddle for about 2 minutes per side. Top with strawberry mixture.

FC PICK→

SWEET CHARITY

Next time you want to send someone a delicious edible, consider these—part of the proceeds goes to great causes. Our current favorite gifts that give back:

→ BAKING FOR GOOD
This online bakery donates 15% of every order to a nonprofit or community organization of your choosing. (There are more than 100 to select from or you can suggest one.) The Chocolate Chunk Brownies are out-of-this-world rich. **Bakingforgood.com, $22 to $24/dozen**

→ GEORGETOWN CUPCAKE
This well-known Washington, D.C., shop ships its special Susan G. Komen Dozen cupcakes nationwide and donates the entire price to Susan G. Komen for the Cure, which helps fight breast cancer. **Georgetowncupcake.com, $29/dozen (plus overnight shipping)**

→ MARATHON OF MIRACLES BARS Our editors love these bars, with their nuts, seeds and big pieces of blueberries and cranberries. One hundred percent of the net profits goes to a nonprofit that provides cancer wellness and prevention programs. **Marathonofmiracles.org, $30/dozen**

① An easy starter: Place 20 dried apricot halves on a plate, cut-side up. Spread each with ½ tsp softened cream cheese or goat cheese. Press a walnut half into cheese; sandwich apricot halves together.

② Prepare a spicy snack by tossing 1 cup walnuts with 1 tsp *each* olive oil and ground cumin. Add salt and cayenne pepper to taste. Bake at 350° for 25 to 30 minutes, stirring occasionally.

③ Top salad for six with this dressing: Whisk together 5 tbsp olive oil, 2 tbsp light mayo and 2 tbsp red wine vinegar. Fold in ⅓ cup *each* crumbled Gorgonzola and chopped toasted walnuts.

ONE FOR THE BOOKS >>> Hot off the press, *Melissa's Everyday Cooking with Organic Produce* is a gorgeous hardcover filled with selection and storage tips, and recipes for more than 100 different fruits and vegetables. Dig in! Amazon.com, $30
Share your go-to way to prepare produce at **momster.com/fc/produceideas.** If we pick yours, we'll send you a copy.

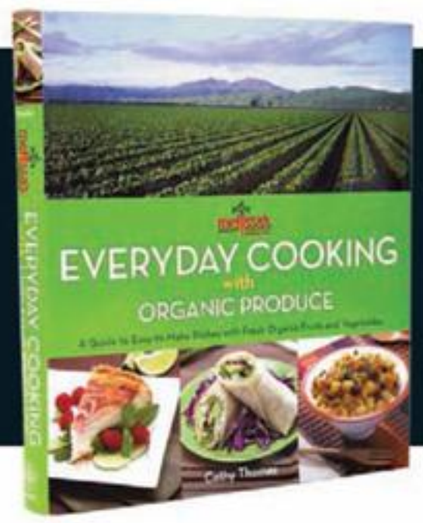

Photo (french toast): Kate Mathis. Food styling: Megan Schlow. Prop styling: Christina Lane. Illustration: Barry Falls.

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KIDS CRAVE. MOMS RAVE.

Campbell's® Kids Soups make both kids and moms smile. They're a good source of Vitamin A, with no artificial flavors or preservatives. And the addition of a natural sea salt helps them have a healthy level of sodium. With plenty of the taste kids love, everyone wins!

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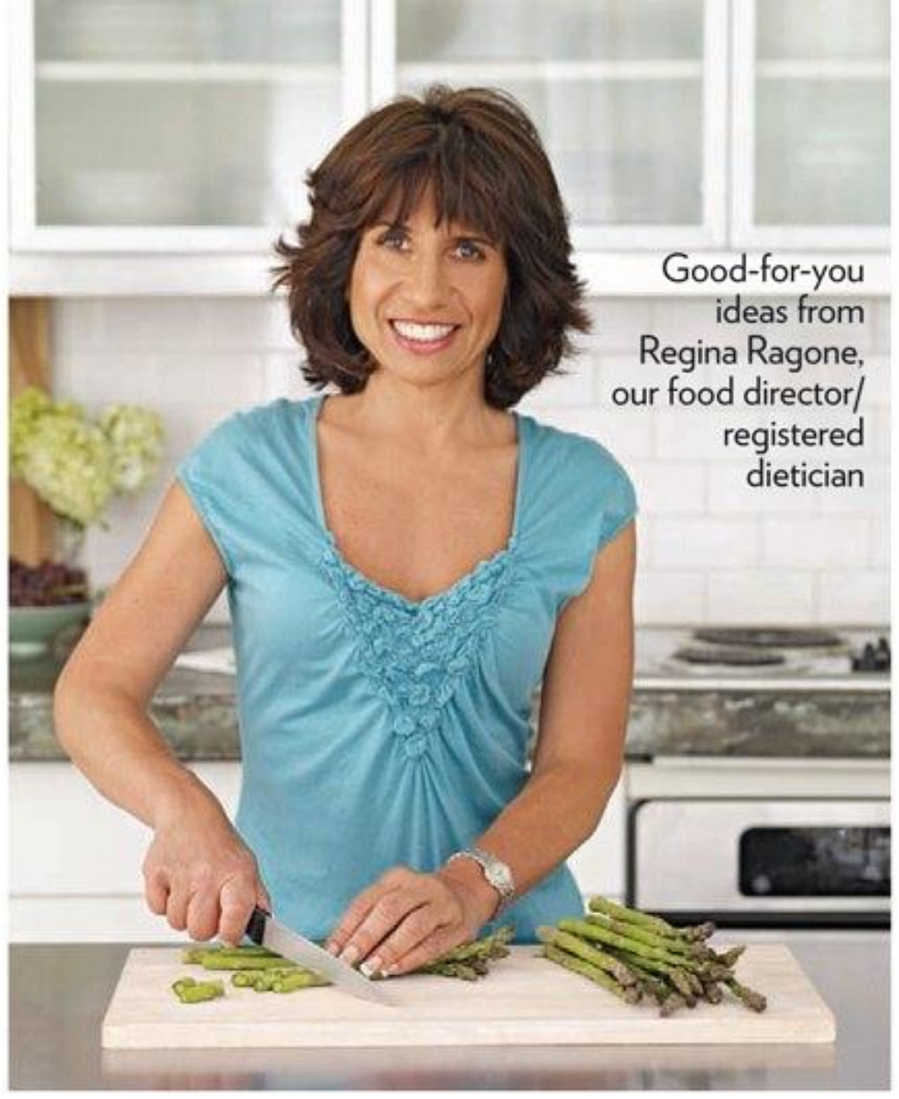
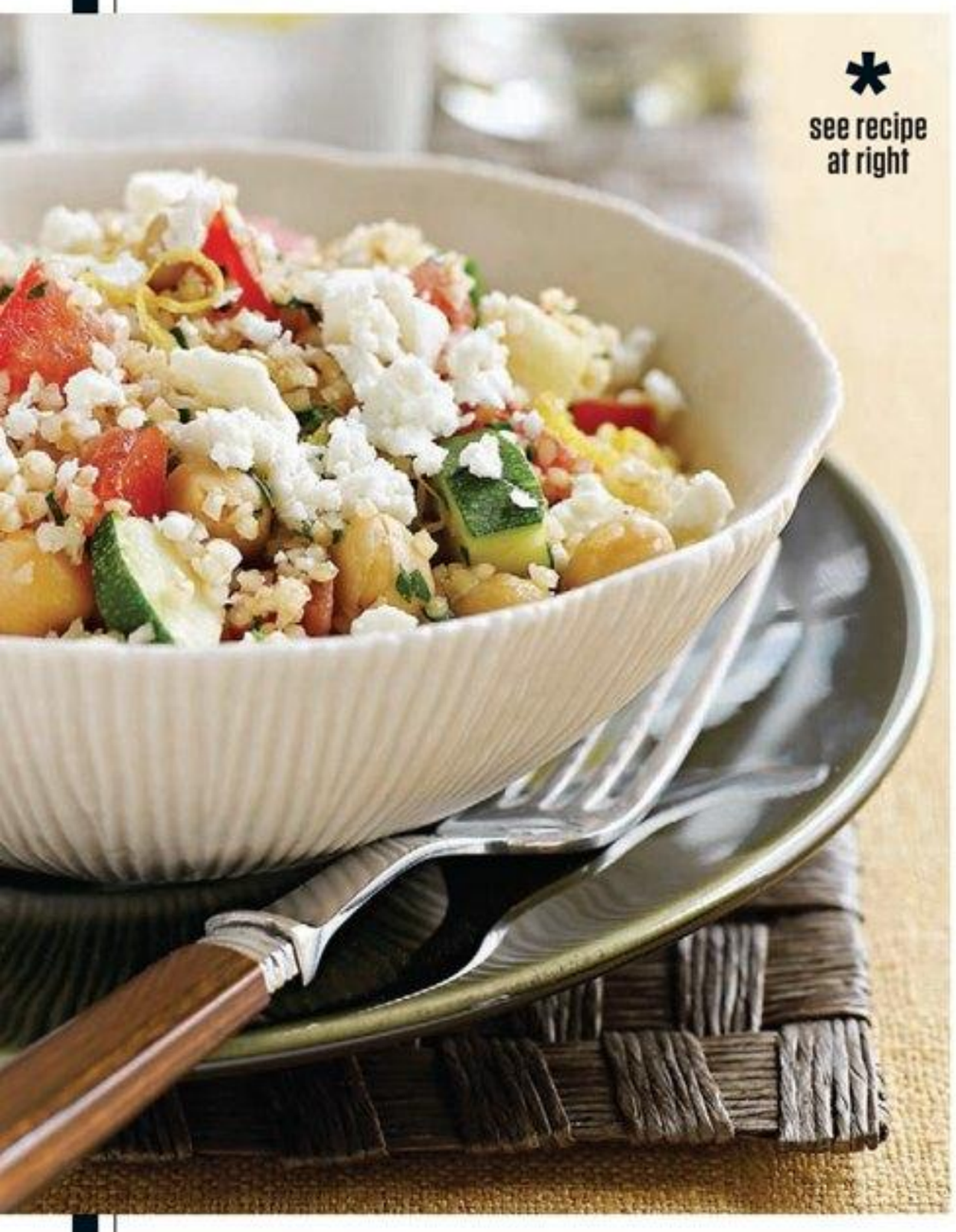
Where's the Meat?



Good-for-you ideas from Regina Ragone, our food director/ registered dietician

A great way to stretch your food budget is to serve meatless meals a few times a week. There's solid scientific evidence indicating that a plant-based diet—high in fruits, vegetables and whole grains—is the key to good health. The fact that so many teenagers are into being vegetarian these days makes this is an easy sell as far as they're concerned. The challenge is planning an overall balanced diet. Some important pointers to consider:



* see recipe at right

Protein Parameters Moms worry that less meat means too little protein, but animal products aren't the only place you get this important nutrient. Eating a variety of plant foods—legumes, nuts, seeds, grains, vegetables and fruits—is key. Know the guidelines: Children ages 4 to 8 should have about 19 grams a day; 9 to 13, 34 grams; and 14 to 18, 46 to 52 grams.

Best Bets For years vegetarians were told they had to eat a certain combination of grains and legumes at each meal to make sure they were getting the proper balance of amino acids necessary to build protein. Research has now established that as long as you're eating a variety of protein-filled foods throughout the day (see table below), your body will get enough of what it needs to run efficiently without animal products. Since beans, peas, lentils and soy foods are high in protein and fiber and low in calories, they're excellent choices.

Global Faves Choose vegetarian recipes from around the world—traditional dishes from Italy, Mexico, France and the Middle East (think eggplant Parmesan, bean burritos, quiche and falafel) are slam-dunks.

Supplement Smarts Eliminating meat may result in certain vitamins and minerals coming up short. To offset less vitamin B12, look for B12-fortified breakfast cereals, soy beverages or veggie burgers. For omega-3s, include canola oil, walnuts and soybeans. Iron is especially important for children and women, so bridge any gap with legumes, whole-grain products, dark leafy greens, sunflower seeds, dried apricots and eggs—be sure to eat these with vitamin C–rich foods like citrus fruits, broccoli, tomatoes and bell peppers for better iron absorption. Last but not least, get zinc from low-fat milk, cheese, yogurt, eggs, whole grains, beans and legumes.

MEDITERRANEAN BULGUR WITH CHICKPEAS

MAKES 4 servings
PREP 15 minutes

- 1 cup bulgur (cracked wheat)
- 2 plum tomatoes, cut into ¼-inch pieces
- 1 small zucchini, cut into ¼-inch pieces
- 3 tablespoons chopped fresh parsley
- 1½ cups boiling water
- 1 can (15.5 ounces) chickpeas, drained and rinsed
- ¾ cup crumbled feta cheese
- ¾ teaspoon grated lemon zest
- 2 tablespoons lemon juice
- 2 tablespoons olive oil

① Combine bulgur, tomatoes, zucchini and parsley in a serving bowl. Pour in boiling water and cover tightly with foil for 12 minutes or until liquid is absorbed and bulgur is tender.

② Stir in chickpeas, feta, lemon zest, lemon juice and olive oil.

PER SERVING 434 calories, 15 g fat (5 g sat.), 14 g protein, 62 g carbohydrate, 12 g fiber, 655 mg sodium, 25 mg cholesterol

PROTEIN PICKS

Soy veggie burger	17 g
Beans, peas or lentils (1 cup)	15 g
Spaghetti (1 cup)	8 g
Edamame (½ cup)	10 g
Peanut butter (2 tbsp)	8 g
Cottage cheese (½ cup)	13 g
Egg substitute (½ cup)	12 g
Cooked spinach (1 cup)	5 g

Photos: (recipe) Alexandra Grablewski; (Ragone) Tina Rupp.

Find more issues at magazinesdownload.com

PRISTIQ® (desvenlafaxine) is a prescription medication approved for the treatment of major depressive disorder in adults.

Important Safety Information About PRISTIQ®

Suicidality and Antidepressant Drugs Antidepressants increased the risk compared to placebo of suicidal thinking and behavior (suicidality) in children, teens, and young adults. Depression and certain other psychiatric disorders are themselves associated with increases in the risk of suicide. Patients of all ages who are started on antidepressant therapy or when the dose is changed should be monitored appropriately and observed closely for clinical worsening, suicidality, or unusual changes in behavior such as becoming agitated, irritable, hostile, aggressive, impulsive, or restless. Should these occur, report them to a doctor. PRISTIQ is not approved for use in children under 18.

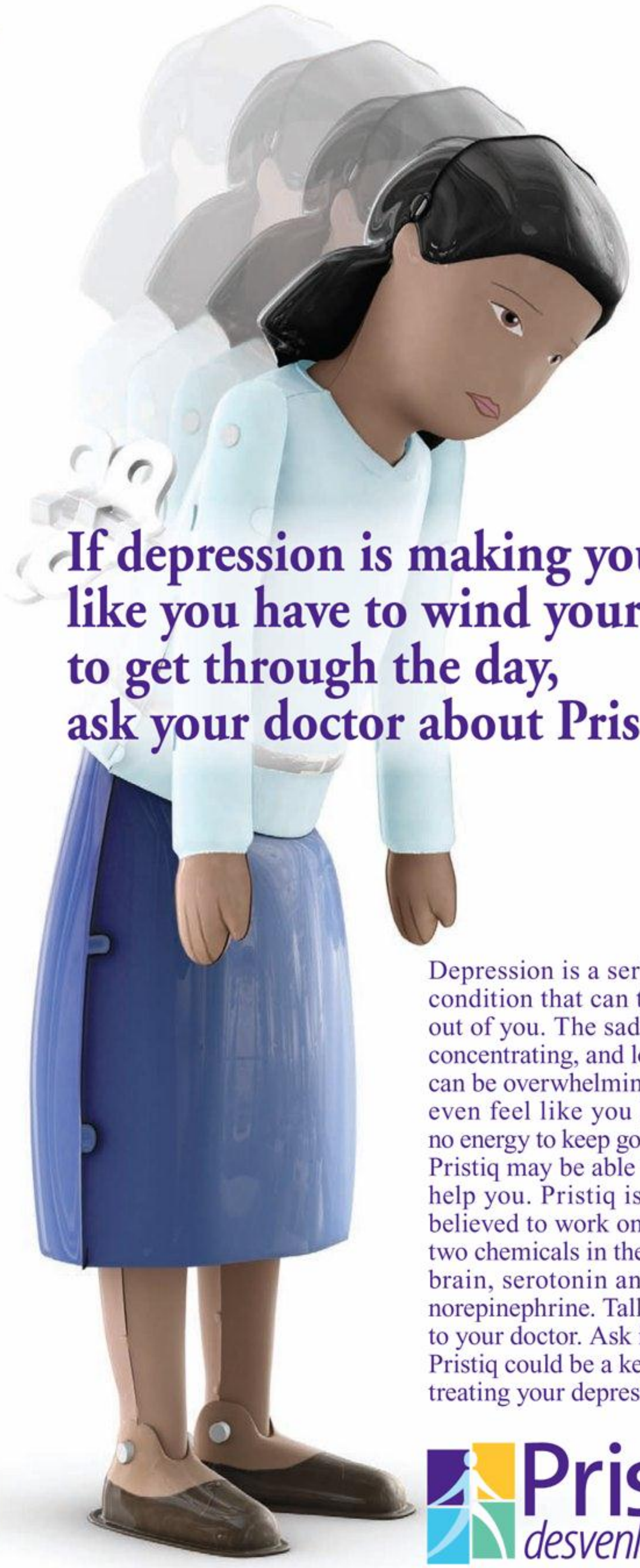
People taking MAOIs should not take PRISTIQ. Tell your healthcare professional about all prescription and over-the-counter medications you are taking or plan to take, including: medicines to treat migraines or mood disorders, to avoid a potentially life-threatening condition; and aspirin, NSAID pain relievers, or blood thinners because they may increase the risk of bleeding.

PRISTIQ may cause or make some conditions worse, so tell your healthcare professional about all your medical conditions, including:

- High blood pressure, which should be controlled before you start taking PRISTIQ and monitored regularly
- Heart problems, high cholesterol or triglyceride levels, or a history of stroke, glaucoma or increased eye pressure, kidney or liver problems, or have low sodium levels in your blood
- Mania, bipolar disorder, or seizures or convulsions
- If nursing, pregnant, or plan to become pregnant

Discontinuation symptoms may occur when stopping or reducing PRISTIQ, so talk to your healthcare professional before stopping or changing your dose of PRISTIQ. Until you see how PRISTIQ affects you, be careful driving a car or operating machinery. Avoid drinking alcohol while taking PRISTIQ. Side effects when taking PRISTIQ 50 mg may include nausea, dizziness, sweating, constipation, and decreased appetite.

Please see Brief Summary of Prescribing Information on next page.



Depression is a serious medical condition that can take so much out of you. The sadness, trouble concentrating, and loss of interest can be overwhelming. You may even feel like you have no energy to keep going. Pristiq may be able to help you. Pristiq is believed to work on two chemicals in the brain, serotonin and norepinephrine. Talk to your doctor. Ask if Pristiq could be a key in treating your depression.

Pristiq® desvenlafaxine
EXTENDED-RELEASE TABLETS

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Visit Pristiq.com or call 1-800-PRISTIQ (1-800-774-7847)

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May 2010

PQP00091

IMPORTANT FACTS ABOUT Pristiq® desvenlafaxine

EXTENDED-RELEASE TABLETS

(pris•teek')
Pristiq® - (desvenlafaxine) Extended-Release Tablets

Read the Medication Guide that comes with you or your family member's antidepressant medicine. Talk to your, or your family member's, healthcare provider about:
- all risks and benefits of treatment with antidepressant medicines
- all treatment choices for depression or other serious mental illness

What is the most important information I should know about antidepressant medicines, depression and other serious mental illnesses, and suicidal thoughts or actions?

1. Antidepressant medicines may increase suicidal thoughts or actions in some children, teenagers, and young adults within the first few months of treatment.

2. Depression and other serious mental illnesses are the most important causes of suicidal thoughts and actions. Some people may have a particularly high risk of having suicidal thoughts or actions. These include people who have (or have a family history of) bipolar illness (also called manic-depressive illness) or suicidal thoughts or actions.

3. How can I watch for and try to prevent suicidal thoughts and actions in myself or a family member?
- Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts, or feelings. This is very important when an antidepressant medicine is started or when the dose is changed.
- Call the healthcare provider right away to report new or sudden changes in mood, behavior, thoughts, or feelings.
- Keep all follow-up visits with the healthcare provider as scheduled. Call the healthcare provider between visits as needed, especially if you have concerns about symptoms.

Call a healthcare provider right away if you or your family member has any of the following symptoms, especially if they are new, worse, or worry you:
- thoughts about suicide or dying
- attempts to commit suicide
- new or worse depression
- new or worse anxiety
- feeling very agitated or restless
- panic attacks
- trouble sleeping (insomnia)
- new or worse irritability
- acting aggressive, being angry or violent
- acting on dangerous impulses
- an extreme increase in activity and talking (mania)
- other unusual changes in behavior or mood

What else do I need to know about antidepressant medicines?
- **Never stop an antidepressant medicine without first talking to a healthcare provider.** Stopping an antidepressant medicine suddenly can cause other symptoms.
- **Antidepressants are medicines used to treat depression and other illnesses.** It is important to discuss all the risks of treating depression and also the risks of not treating it. Patients and their families or other caregivers should discuss all treatment choices with the healthcare provider, not just the use of antidepressants.
- **Antidepressant medicines have other side effects.** Talk to the healthcare provider about the side effects of the medicine prescribed for you or your family member.
- **Antidepressant medicines can interact with other medicines.** Know all of the medicines that you or your family member takes. Keep a list of all medicines to show the healthcare provider. Do not start new medicines without first checking with your healthcare provider.
- **Not all antidepressant medicines prescribed for children are FDA approved for use in children**. Talk to your child's healthcare provider for more information.

This Medication Guide has been approved by the U.S. Food and Drug Administration for all antidepressants.

Important Information about Pristiq

Read the patient information that comes with Pristiq before you take Pristiq and each time you refill your prescription. There may be new information. If you have questions, ask your healthcare provider. This information does not take the place of talking with your healthcare provider about your medical condition or treatment.

What is Pristiq?
- Pristiq is a prescription medicine used to treat depression. Pristiq belongs to a class of medicines known as SNRIs (or serotonin-norepinephrine reuptake inhibitors).
- Pristiq is not approved for use in children and adolescents.

Who should not take Pristiq?

Do not take Pristiq if you:
- are allergic to desvenlafaxine, venlafaxine or any of the ingredients in Pristiq.
- currently take, or have taken within the last 14 days, any medicine known as an MAOI. Taking an MAOI with certain other medicines, including Pristiq, can cause serious or even life-threatening side effects. Also, you must wait at least 7 days after you stop taking Pristiq before you take any MAOI.

What should I tell my healthcare provider before taking Pristiq?

Tell your healthcare provider about all your medical conditions, including if you:
- have high blood pressure
- have heart problems
- have high cholesterol or high triglycerides
- have a history of stroke
- have glaucoma
- have kidney problems
- have liver problems
- have or had bleeding problems
- have or had seizures or convulsions
- have mania or bipolar disorder
- have low sodium levels in your blood
- are pregnant or plan to become pregnant. It is not known if Pristiq will harm your unborn baby.
- are breastfeeding. Pristiq can pass into your breast milk and may harm your baby. Talk with your healthcare provider about the best way to feed your baby if you take Pristiq.

•Serotonin syndrome or neuroleptic malignant syndrome (NMS)-like reactions
Rare, but potentially life-threatening, conditions called serotonin syndrome or Neuroleptic Malignant Syndrome (NMS)-like reactions can happen when medicines such as Pristiq are taken with certain other medicines. Serotonin syndrome or NMS-like reactions can cause serious changes in how your brain, muscles and digestive system work.

Especially tell your healthcare provider if you take the following:
- medicines to treat migraine headaches known as triptans
- St. John's Wort
- MAOIs (including linezolid, an antibiotic)
- tryptophan supplements
- silbutramine
- tramadol
- medicines used to treat mood disorders, including tricyclics, lithium, selective serotonin reuptake inhibitors (SSRIs), or serotonin norepinephrine reuptake inhibitors (SNRIs)

Ask your healthcare provider if you are not sure whether you are taking any of these medicines.

Before you take Pristiq with any of these medicines, talk to your healthcare provider about serotonin syndrome. See "What are the possible side effects of Pristiq?"

Pristiq contains the medicine desvenlafaxine. Do not take Pristiq with other medicines containing venlafaxine or desvenlafaxine.

Switching from other antidepressants

Side effects from discontinuing antidepressant medication have occurred when patients switched from other antidepressants, including venlafaxine, to Pristiq. Your doctor may gradually reduce the dose of your initial antidepressant medication to help reduce these side effects.

What should I avoid while taking Pristiq?
- Do not drive a car or operate machinery until you know how Pristiq affects you.
- Avoid drinking alcohol while taking Pristiq.

What are the possible side effects of Pristiq?

Pristiq can cause serious side effects, including:
- **See the beginning of this page.**
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Get medical help right away if you think that you have these syndromes. Signs and symptoms of these syndromes may include one or more of the following:
- restlessness
- hallucinations (seeing and hearing things that are not real)
- coma
- nausea
- vomiting
- confusion
- increase in blood pressure
- diarrhea
- loss of coordination
- fast heart beat
- increased body temperature
- muscle stiffness

Pristiq may also cause other serious side effects including:
- **New or worsened high blood pressure (hypertension).** Your healthcare provider should monitor your blood pressure before and while you are taking Pristiq. If you have high blood pressure, it should be controlled before you start taking Pristiq.
- **Abnormal bleeding or bruising.** Pristiq and other SNRIs/SSRIs may cause you to have an increased chance of bleeding. Taking aspirin, NSAIDs (non-steroidal anti-inflammatory drugs), or blood thinners may add to this risk. Tell your healthcare provider right away about any unusual bleeding or bruising.
- **Glaucoma (increased eye pressure)**
- **Increased cholesterol and triglyceride levels in your blood**
- **Symptoms when stopping Pristiq (discontinuation symptoms).** Side effects may occur when stopping Pristiq (discontinuation symptoms), especially when therapy is stopped suddenly. Your healthcare provider may want to decrease your dose slowly to help avoid side effects.

Some of these side effects may include:
- dizziness
- nausea
- anxiety
- irritability
- sleeping problems (insomnia)
- sweating
- abnormal dreams
- tiredness
- diarrhea
- headache
- **Seizures (convulsions)**
- **Low sodium levels in your blood.** Symptoms of this may include headache, difficulty concentrating, memory changes, confusion, weakness, and unsteadiness on your feet. In severe or more sudden cases, symptoms can include hallucinations (seeing or hearing things that are not real), fainting, seizures and coma. If not treated, severe low sodium levels could be fatal. Contact your healthcare provider if you think you have any of these side effects.

Common side effects with Pristiq include:
- nausea
- headache
- dry mouth
- sleepiness
- dilated pupils
- insomnia
- constipation
- loss of appetite
- tremor
- diarrhea
- vomiting
- anxiety
- dizziness
- decreased sex drive
- delayed orgasm and ejaculation
- sweating
- tiredness

These are not all the possible side effects of Pristiq. Tell your healthcare provider about any side effect that bothers you or does not go away. Call your doctor for medical advice about side effects. For more information on these and other side effects associated with Pristiq, talk to your healthcare provider, visit our web site at www.pristiq.com or call our toll-free number 1-888-Pristiq.

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Contact Information
Please visit our web site at www.pristiq.com, or call our toll-free number 1-888-Pristiq to receive more information. This product's label may have been updated. For current package insert and further product information, please visit www.pfizer.com or call our medical communications department toll-free at 1-800-934-5556.

Uninsured? Need help paying for Pfizer medicines? Pfizer has programs that can help. Call **1-866-706-2400** or visit **www.PfizerHelpfulAnswers.com.**

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- diarrhea
- headache
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- loss of appetite
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- anxiety
- dizziness
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- delayed orgasm and ejaculation
- sweating
- tiredness

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Contact Information
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Uninsured? Need help paying for Pfizer medicines?
Pfizer has programs that can help. Call **1-866-706-2400** or visit **www.PfizerHelpfulAnswers.com.**

Pfizer helpful answers

HEALTHY FAMILY DINNERS®

WOK & ROLL

OUR HEALTHY, HOMEMADE VERSIONS OF CHINESE TAKEOUT REALLY DELIVER.

BY MICHAEL TYRRELL • PHOTOGRAPHY BY YUNHEE KIM

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CANTONESE SHRIMP

page 109

MOO SHU VEGETABLES

MAKES 10 wraps
PREP 15 minutes **GRILL** 6 minutes
COOK 10 minutes, 30 seconds

- 1 package (8 ounces) firm tofu, cut into 6 slices
- 2 tablespoons smoky spicy grilling sauce (such as House of Tsang)
- 1 tablespoon canola oil
- 2 cloves garlic, peeled and chopped
- 2 tablespoons gingerroot, peeled and chopped
- 1 bag (10 ounces) coleslaw mix
- 1 bag (8 ounces) shredded carrots
- 4 ounces sliced mixed mushrooms
- 1 cup bean sprouts
- ½ cup vegetable broth
- ¼ cup hoisin sauce
- 3 tablespoons light soy sauce
- 6 scallions, sliced
- 1 teaspoon sesame oil
- 10 whole-wheat flour tortillas (such as Mission Life Balance)

① Heat a grill pan over medium heat. Coat with cooking spray. Brush both sides of the tofu slices with the grilling sauce and grill for 3 minutes per side. Remove to a plate and cut into small cubes. Keep warm.

② In a large nonstick skillet or wok, heat oil over medium-high heat. Add garlic and ginger and cook 30 seconds. Add coleslaw mix, carrots, mushrooms, bean sprouts and ¼ cup of the broth. Cook, stirring frequently, for 8 minutes.

③ Stir together remaining ¼ cup broth, hoisin sauce and soy sauce. Add to skillet and cook 2 minutes, stirring occasionally. Stir in the scallions, sesame oil and reserved tofu.

④ Serve with slightly warmed tortillas.

PER WRAP 221 calories; 6 g fat (2 g sat.); 8 g protein; 32 g carbohydrate; 5 g fiber; 843 mg sodium; 0 mg cholesterol

Food styling: Megan Schlow. Prop styling: Megan Hedgpeth.

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SICHUAN CHICKEN

MAKES 6 servings **PREP** 15 minutes **COOK** 15 minutes

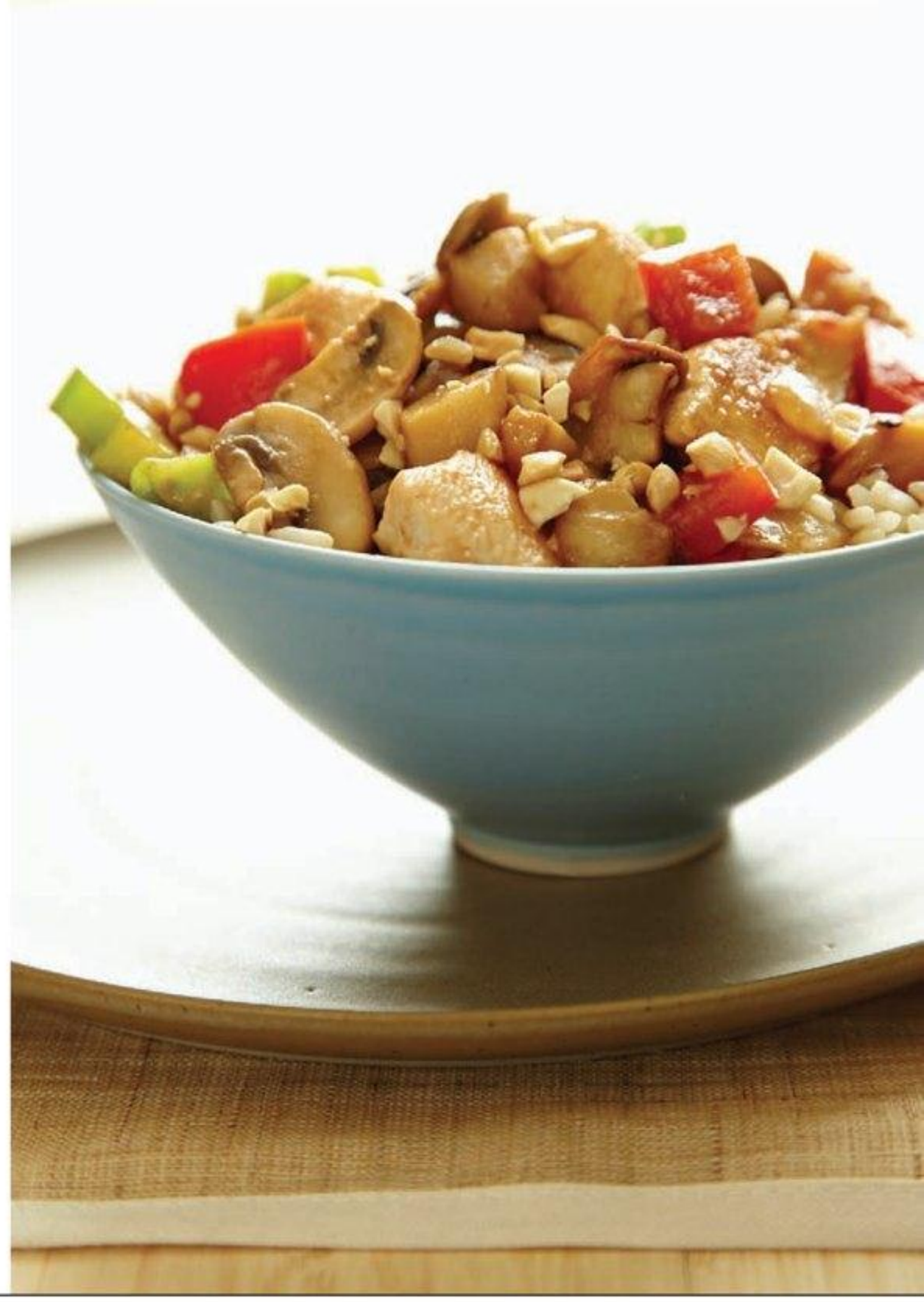
- ½ cup low-sodium chicken broth
- 2 tablespoons light soy sauce
- 2 tablespoons rice vinegar
- 2 teaspoons cornstarch
- 1 teaspoon sugar
- 1 to 2 teaspoons Sriracha (Thai chile and garlic sauce)
- 1 tablespoon canola oil
- 1½ pounds boneless, skinless chicken breast, cut into 1-inch chunks
- 8 ounces sliced white mushrooms
- 1 sweet red pepper, seeded and chopped
- 1 medium onion, peeled and chopped
- 3 ribs celery, chopped
- 1 can (8 ounces) diced water chestnuts, drained
- ¼ cup chopped peanuts
- 3 cups cooked white rice

① In a medium bowl, mix together broth, soy sauce, vinegar, cornstarch, sugar and Sriracha sauce. Set aside.

② Heat oil in a large nonstick skillet or wok over medium-high heat. Add chicken and stir-fry for 6 to 7 minutes, until no longer pink inside. Remove to a plate and keep warm. Add mushrooms, red pepper, onion and celery to skillet and stir-fry for 6 minutes until vegetables are crisp-tender. Stir in reserved broth and soy sauce mixture, water chestnuts and cooked chicken. Simmer for 2 minutes, stirring occasionally, until thickened and water chestnuts and chicken are heated through.

③ Sprinkle with chopped peanuts and serve with cooked white rice.

PER SERVING 373 calories; 8 g fat (1 g sat.); 33 g protein; 42 g carbohydrate; 5 g fiber; 339 mg sodium; 68 mg cholesterol



Q: How do I make comfort food when I'm not comfortable cooking?

Serving suggestion
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PEPPER STEAK

MAKES 6 servings **PREP** 15 minutes **COOK** 15 minutes

- 1 tablespoon canola oil
- 1½ pounds boneless sirloin, sliced against the grain ¾ inch thick
- ¼ teaspoon salt
- 2 large onions, peeled, halved and cut into ½-inch-thick slices
- 3 green peppers, cored, seeded and cut into ¾-inch-thick slices
- 3 cloves garlic, sliced
- ½ cup reduced-sodium beef broth
- 3 tablespoons light soy sauce
- 1 tablespoon rice vinegar
- 1 teaspoon cornstarch
- ½ teaspoon Chinese five-spice powder
- 1 can (14½ ounces) no-salt-added stewed tomatoes, drained
- 3 cups cooked brown rice

① Heat oil in a large nonstick skillet or wok over medium-high heat. Season steak with the salt and cook 4 to 5 minutes, turning after 2 minutes. Remove to a plate and keep warm.

② Add onions, peppers and garlic to skillet and stir-fry 8 minutes, stirring occasionally. Mix together broth, soy sauce, vinegar, cornstarch and Chinese five-spice powder. Add to skillet; stir in the tomatoes. Simmer for 2 minutes. Add in the steak along with any accumulated juices. Heat through. Serve with cooked brown rice.

PER SERVING 351 calories; 8 g fat (2 g sat.); 28 g protein; 42 g carbohydrate; 5 g fiber; 685 mg sodium; 42 mg cholesterol

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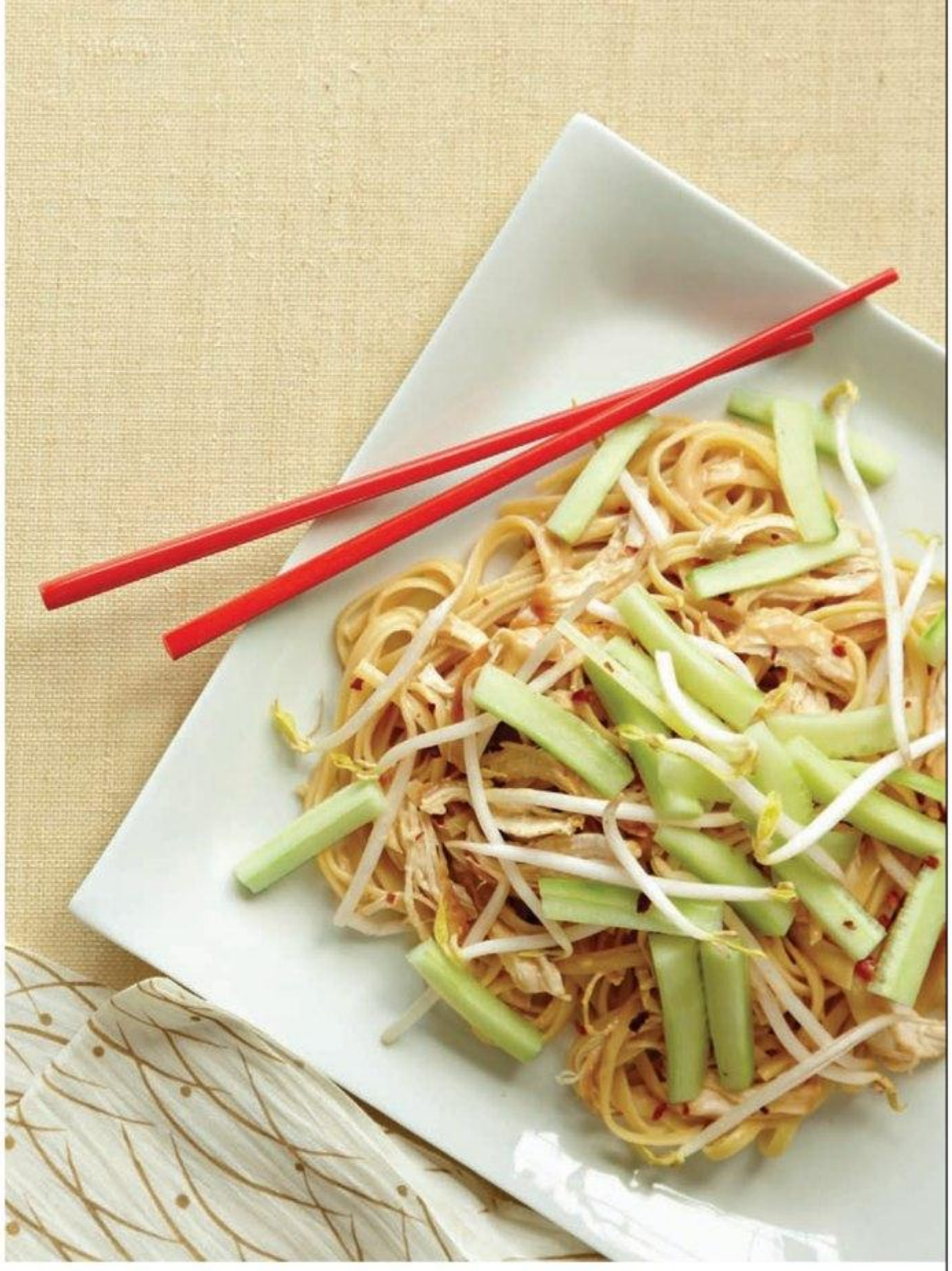

PEANUT NOODLES & CHICKEN

MAKES 4 servings (6 cups) **PREP** 15 minutes **COOK** about 10 minutes

- ½ pound linguine
- 2 tablespoons light soy sauce
- 2 tablespoons lemon juice
- ½ teaspoon cornstarch
- ⅓ cup reduced-fat peanut butter
- 2 cloves garlic, finely chopped
- ½ teaspoon sugar
- ¼ teaspoon red pepper flakes
- 1 teaspoon sesame oil
- 1 pound cooked chicken, shredded
- ½ cucumber, peeled and cut into 2-inch matchsticks
- ½ cup bean sprouts

① Cook linguine following package directions. Drain and rinse under cold water.

② Mix together the soy sauce, lemon juice and cornstarch. In a medium-size saucepan, combine peanut butter, garlic, sugar, red pepper flakes and **½ cup hot water.** Whisk in the soy sauce mixture and bring to a simmer. Whisk until smooth. Remove from heat; stir in the sesame oil.

③ In a large bowl, toss together linguine, chicken and peanut butter mixture. Scatter cucumber and bean sprouts over the top and serve at room temperature.

PER SERVING 487 calories; 11 g fat (2 g sat.); 40 g protein; 56 g carbohydrate; 4 g fiber; 547 mg sodium; 66 mg cholesterol

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PORK FRIED RICE

MAKES 6 servings **PREP** 15 minutes
BROIL 8 minutes **COOK** 12 minutes

- ½ cup reduced-sodium chicken broth
- ¼ cup light soy sauce
- 1 tablespoon oyster sauce
- ½ teaspoon ground ginger
- ¼ teaspoon red pepper flakes
- 1 pound boneless pork chops, about ½ inch thick
- 2 eggs, lightly beaten
- 1 tablespoon canola oil
- 1 large onion, peeled and chopped
- 1 large red sweet pepper, cored, seeded and thinly sliced
- 3 cups cooked brown rice
- 4 scallions, sliced
- 1 cup frozen peas, thawed
- 1 tablespoon sesame oil

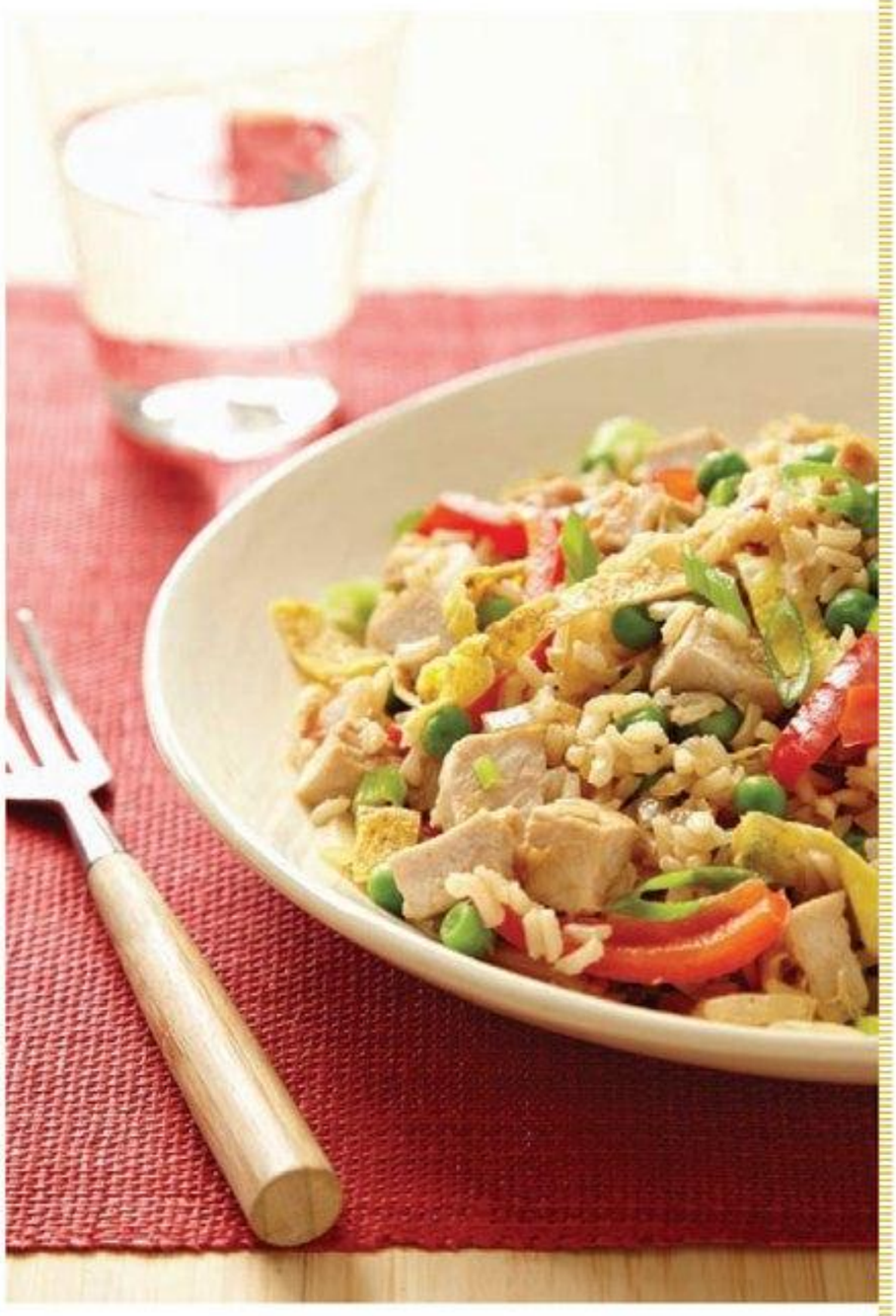
① In a small bowl, mix together broth, soy sauce, oyster sauce, ginger and pepper flakes. Set aside.

② Heat broiler. Broil pork chops for 4 minutes per side. Dice and reserve.

③ Heat a medium-size nonstick skillet over medium heat. Coat with cooking spray. Add eggs and cook for 2 minutes, until set. Remove to a plate and cut into ½-inch strips. Reserve.

④ Heat oil in a large nonstick skillet or wok. Add onion and red pepper and stir-fry for 5 to 6 minutes, until softened. Stir in broth mixture and rice. Stir-fry 2 minutes. Add reserved pork, egg strips, scallions, peas and sesame oil. Stir gently to combine and heat through, about 2 minutes.

PER SERVING 339 calories; 11 g fat (2 g sat.); 24 g protein; 36 g carbohydrate; 5 g fiber; 653 mg sodium; 117 mg cholesterol



CANTONESE SHRIMP

MAKES 6 servings
PREP 15 minutes
COOK about 9 minutes

- 1 cup vegetable broth
- 2 tablespoons light soy sauce
- 1 tablespoon cornstarch
- 1 tablespoon oyster sauce
- 2 tablespoons canola oil
- 1¾ pounds extra-large shrimp, shelled and deveined
- ½ pound snow peas
- 2 tablespoons gingerroot, finely chopped
- 1 can (8 ounces) bamboo shoots (such as Asian Gourmet), drained
- 1 can (8 ounces) baby corn, (such as Asian Gourmet), drained
- 1 package (13.75 ounces) whole-grain thin spaghetti, cooked following package directions

① In a small bowl, stir together broth, soy sauce, cornstarch and oyster sauce. Set aside.

② Heat 1 tablespoon of the oil in a large nonstick skillet or wok over medium-high heat. Add shrimp and cook for 4 minutes, turning after 2 minutes. Remove shrimp to a plate and keep warm.

③ Add remaining tablespoon oil to skillet and add snow peas and ginger. Stir-fry for 2 minutes. Add bamboo shoots, corn, broth and soy sauce mixture. Simmer for 2 minutes, until thickened. Stir in shrimp and cook until heated through, about 1 minute. Serve over cooked spaghetti.

PER SERVING 466 calories; 9 g fat (1 g sat.); 36 g protein; 60 g carbohydrate; 12 g fiber; 807 mg sodium; 172 mg cholesterol ●

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FOR TYPE 2 DIABETES

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*Victoza® is not a weight-loss product.
Model is used for illustrative purposes only.

Indications and Usage:
Victoza® is an injectable prescription medicine that may improve blood sugar (glucose) in adults with type 2 diabetes when used along with diet and exercise.

Victoza® is not recommended as the first medication to treat diabetes. Victoza® is not insulin and has not been studied in combination with insulin. Victoza® is not for people with type 1 diabetes or people with diabetic ketoacidosis. It is not known if Victoza® is safe and effective in children. Victoza® is not recommended for use in children.

Important Safety Information:
In animal studies, Victoza® caused thyroid tumors—including thyroid cancer—in some rats and mice. It is not known whether Victoza® causes thyroid tumors or a type of thyroid cancer called medullary thyroid cancer (MTC) in people which may be fatal if not detected and treated early. Do not use Victoza® if you or any of your family members have a history of MTC or if you have Multiple Endocrine Neoplasia syndrome type 2 (MEN 2). While taking Victoza®, tell your doctor if you get a lump or swelling in your neck, hoarseness, trouble swallowing, or shortness of breath. These may be symptoms of thyroid cancer.

Inflammation of the pancreas (pancreatitis) may be severe and lead to death. Before taking Victoza®, tell your doctor if you have had pancreatitis, gallstones, a history of alcoholism, or high blood triglyceride levels since these medical conditions make you more likely to get pancreatitis.

Stop taking Victoza® and call your doctor right away if you have pain in your stomach area that is severe and will not go away, occurs with or without vomiting, or is felt going from your stomach area through to your back. These may be symptoms of pancreatitis.

Before using Victoza®, tell your doctor about all the medicines you take, especially sulfonylurea medicines or insulin, as taking them with Victoza® may affect how each medicine works.

Also tell your doctor if you are allergic to any of the ingredients in Victoza®; have severe stomach problems such as slowed emptying of your stomach (gastroparesis) or problems with digesting food; have or have had kidney or liver problems; have any other medical conditions; are pregnant or plan to become pregnant. Tell your doctor if you are breastfeeding

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or plan to breastfeed. It is unknown if Victoza® will harm your unborn baby or if Victoza® passes into your breast milk.

Your risk for getting hypoglycemia, or low blood sugar, is higher if you take Victoza® with another medicine that can cause low blood sugar, such as a sulfonylurea. The dose of your sulfonylurea medicine may need to be lowered while taking Victoza®.

The most common side effects with Victoza® include headache, nausea, diarrhea, and resistance to liraglutide (antibody formation). Nausea is most common when first starting Victoza®, but decreases over time in most people. Immune system-related reactions, including hives, were more common in people treated with Victoza® compared to people treated with other diabetes drugs in medical studies.

Please see Brief Summary of Important Patient Information on next page.

If you need assistance with prescription drug costs, help may be available. Visit pparx.org or call 1-888-4PPA-NOW.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit fda.gov/medwatch or call 1-800-FDA-1088.

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Important Patient Information

This is a BRIEF SUMMARY of important information about Victoza®. This information does not take the place of talking with your doctor about your medical condition or your treatment. If you have any questions about Victoza®, ask your doctor. Only your doctor can determine if Victoza® is right for you.

WARNING

During the drug testing process, the medicine in Victoza® caused rats and mice to develop tumors of the thyroid gland. Some of these tumors were cancers. It is not known if Victoza® will cause thyroid tumors or a type of thyroid cancer called medullary thyroid cancer (MTC) in people. If MTC occurs, it may lead to death if not detected and treated early. Do not take Victoza® if you or any of your family members have MTC, or if you have Multiple Endocrine Neoplasia syndrome type 2 (MEN 2). This is a disease where people have tumors in more than one gland in the body.

What is Victoza® used for?

- Victoza® is a glucagon-like-peptide-1 (GLP-1) receptor agonist used to improve blood sugar (glucose) control in adults with type 2 diabetes mellitus, when used with a diet and exercise program.
- Victoza® should not be used as the first choice of medicine for treating diabetes.
- Victoza® has not been studied in enough people with a history of pancreatitis (inflammation of the pancreas). Therefore, it should be used with care in these patients.
- Victoza® is not for use in people with type 1 diabetes mellitus or people with diabetic ketoacidosis.
- It is not known if Victoza® is safe and effective when used with insulin.

Who should not use Victoza®?

- Victoza® should not be used in people with a personal or family history of MTC or in patients with MEN 2.

What is the most important information I should know about Victoza®?

- In animal studies, Victoza® caused thyroid tumors. The effects in humans are unknown. People who use Victoza® should be counseled on the risk of MTC and symptoms of thyroid cancer.
- In clinical trials, there were more cases of pancreatitis in people treated with Victoza® compared to people treated with other diabetes drugs. If pancreatitis is suspected, Victoza® and other potentially suspect drugs should be discontinued. Victoza® should not be restarted if pancreatitis is confirmed. Victoza® should be used with caution in people with a history of pancreatitis.
- Serious low blood sugar (hypoglycemia) may occur when Victoza® is used with other diabetes medications called sulfonylureas. This risk can be reduced by lowering the dose of the sulfonylurea.
- Like all other diabetes medications, Victoza® has not been shown to decrease the risk of large blood vessel disease (i.e. heart attacks and strokes).

What are the side effects of Victoza®?

- Tell your healthcare provider if you get a lump or swelling in your neck, hoarseness, trouble swallowing, or shortness of breath while taking Victoza®. These may be symptoms of thyroid cancer.
- The most common side effects, reported in at least 5% of people treated with Victoza® and occurring more commonly than people treated with a placebo (a non-active injection used to study drugs in clinical trials) are headache, nausea, diarrhea, and resistance to liraglutide (antibody formation).
- Immune system related reactions, including hives, were more common in people treated with Victoza® (0.8%) compared to people treated with other diabetes drugs (0.4%) in clinical trials.
- This listing of side effects is not complete. Your health care professional can discuss with you a more complete list of side effects that may occur when using Victoza®.

What should I know about taking Victoza® with other medications?

- Victoza® slows emptying of your stomach. This may impact how your body absorbs other drugs that are taken by mouth at the same time.

Can Victoza® be used in children?

- Victoza® has not been studied in people below 18 years of age.

Can Victoza® be used in people with kidney or liver problems?

- There is limited data on using Victoza® in people with kidney or liver problems. Victoza® should be used with caution in these types of people.

Still have questions?

This is only a summary of important information. Ask your doctor for more complete product information, or

- call 1-877-4VICTOZA (1-877-484-2869)
- visit victoza.com

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Date of Issue: Jan 2010
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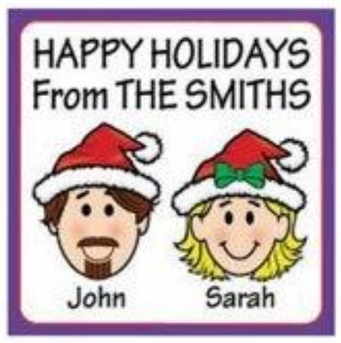

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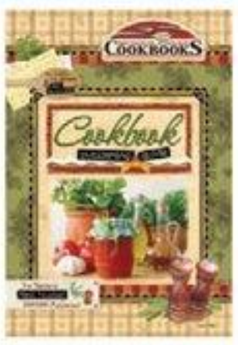

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macaroni. and cheese.

The only thing better than one fantastic recipe? Five of them.

BY JULIE MILTENBERGER

PHOTOGRAPHY BY TINA RUPP

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chicken
taco mac
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broccoli shells
& cheese
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cheeseburger mac & cheese
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Food styling: Anne Disrude. Prop styling: Deborah Williams.

SWANSON® SOUP

ROASTED CHICKEN WITH CARAMELIZED ONIONS SOUP

Prep: 10 min. Cook: 30 min. Makes: 6 servings

- 2 tsp. vegetable oil
- 2 medium onions, cut in half and thinly sliced
- 8 cups Swanson® Chicken Broth (Regular *or* Certified Organic)
- 1/8 tsp. ground black pepper
- 2 medium carrots, sliced
- 2 stalks celery, sliced
- 3/4 cup *uncooked* trumpet-shaped pasta (campanelle)
- 2 cups roasted chicken cut into strips

1. Heat oil in a 10" skillet over medium-high heat. Add onions and cook until they begin to brown, stirring occasionally. Reduce heat to medium. Cook until onions are tender and caramelized, stirring occasionally. Remove skillet from heat.
2. Heat broth, black pepper, carrots and celery in 4-qt. saucepan over medium-high heat to a boil. Stir pasta and chicken in saucepan. Reduce heat to medium. Cook 10 min. or until pasta is tender. Stir in onions and serve immediately.

THE SECRET IS SWANSON® 100% NATURAL CHICKEN BROTH

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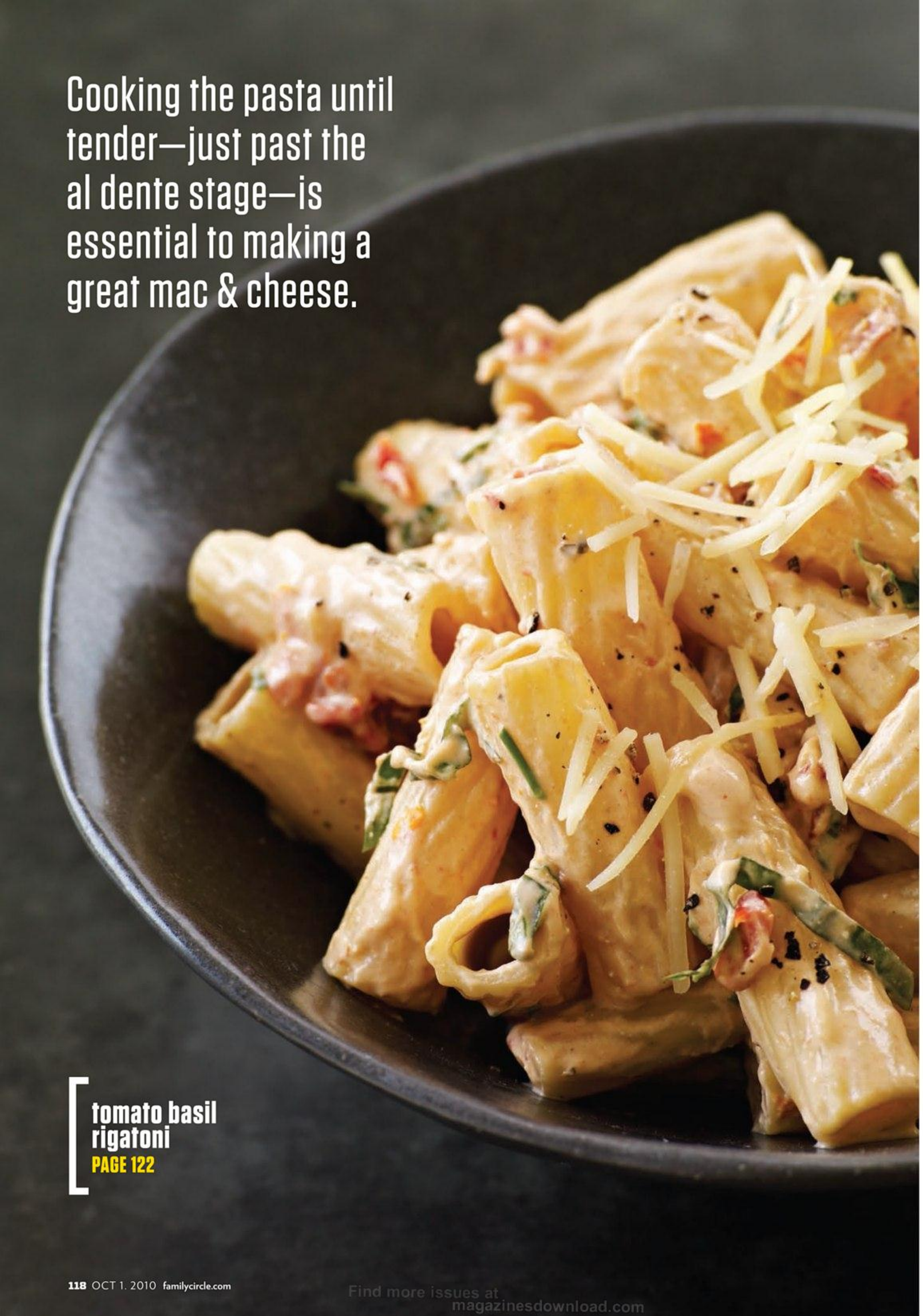

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ON THE COVER

four cheese with bacon

MAKES 10 cups (12 servings) **PREP** 10 minutes **COOK** 10 minutes **BAKE** at 350° for 20 minutes **BROIL** 3 minutes

- **1 box (1 pound) cavatappi**
- **6 slices bacon, diced**
- **1 tablespoon unsalted butter**
- **3 tablespoons all-purpose flour**
- **2 cups 2% milk**
- **½ teaspoon onion flakes**
- **¼ teaspoon salt**
- **¼ teaspoon pepper**
- **½ pound sharp cheddar cheese, shredded**
- **1 cup shredded colby-Jack cheese (4 ounces)**
- **1 cup shredded mozzarella cheese (4 ounces)**
- **8 slices Kraft Deli Deluxe American cheese (6 ounces)**

① Heat oven to 350°. Coat a 3-quart broiler-safe baking dish with nonstick cooking spray. Bring a large pot of lightly salted water to boiling.

② Cook cavatappi 8 minutes in boiling water, then drain. Meanwhile, in medium-size saucepan, cook bacon over medium heat until crisp, 6 minutes. Transfer to paper towels. Carefully pour off drippings, returning 2 tablespoons to pan. Add butter.

③ Whisk in flour until smooth. In a thin stream, whisk in milk. Stir in onion flakes, salt and pepper. Bring to a boil over medium-high heat, then reduce heat and simmer 2 minutes. In large bowl, toss together cheddar, colby-Jack and mozzarella.

④ Remove milk mixture from heat; whisk in American cheese and 1¼ cups of the cheddar mixture. Toss bacon pieces with remaining shredded cheese.

⑤ In pasta pot, combine cooked pasta and cheese sauce. Pour half into prepared dish. Sprinkle with a generous cup of the bacon-cheese mixture. Repeat layering.

⑥ Bake at 350° for 20 minutes. Increase oven temperature to broil and broil 3 minutes, until top is lightly browned. Cool slightly before serving.

PER SERVING 404 calories; 21 g fat (11 g sat.); 20 g protein; 33 g carbohydrate; 2 g fiber; 616 mg sodium; 63 mg cholesterol

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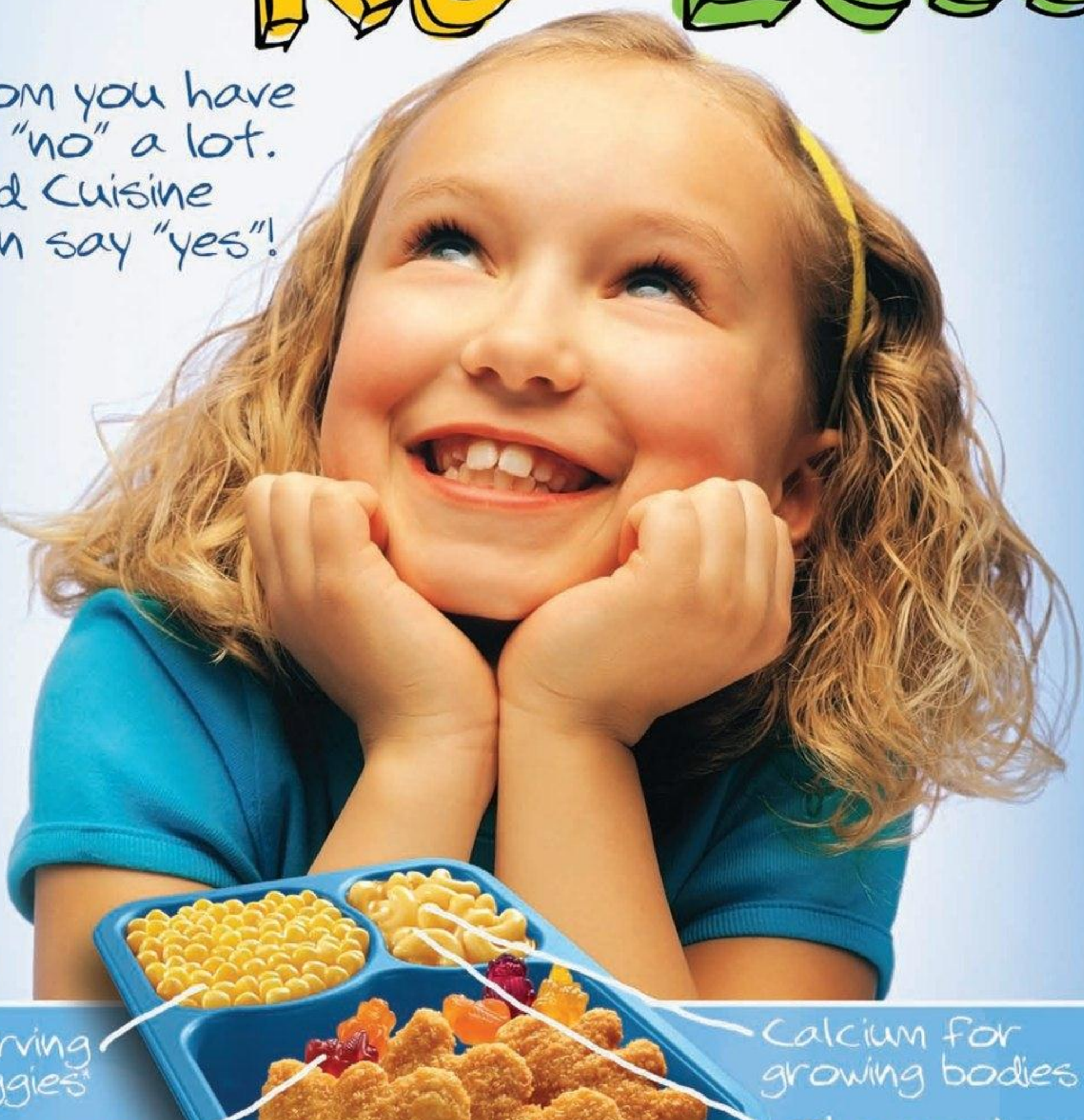

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*Each Kid Cuisine Bug Safari Chicken Nuggets meal provides a half-cup of vegetables, which equals a full serving. The Dietary Guidelines for Americans (2005) recommends 2.5 cups of vegetables (or 5 servings) per day based on a 2,000 calorie diet. The amount of veggies, protein, calcium and/or whole grains will vary for each Kid Cuisine meal.

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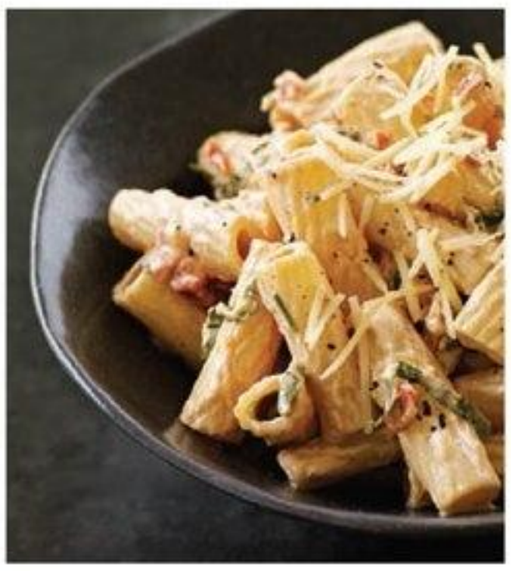


TOMATO BASIL RIGATONI

MAKES 6 servings
PREP 10 minutes
LET STAND 5 minutes
COOK 14 minutes

- ½ cup dry-packed sun-dried tomatoes (about 3 ounces)
- 1 box (16 ounces) rigatoni pasta
- 1½ cups milk
- ¼ cup tomato-basil-flavored cream cheese (such as Philadelphia)
- 4 ounces (4 to 6 slices) provolone cheese, chopped
- 1 cup shredded part-skim mozzarella cheese
- 2 teaspoons cornstarch mixed with 1 tablespoon water
- ½ cup fresh basil leaves, cut into thin strips
- Freshly ground black pepper
- Pinch of salt
- Shredded Parmesan (optional)

① Heat a large pot of lightly salted water to boiling. Carefully scoop out 1 cup and pour over sun-dried tomatoes in a small heatproof bowl. Let stand 5 minutes.

② Meanwhile, cook rigatoni as per package directions, 14 minutes. Drain.

③ While pasta cooks, heat milk over medium heat until bubbly. Remove from heat and whisk in cream cheese, provolone and mozzarella until melted (mixture will be a little stringy). Stir in cornstarch-water mixture and return pan to heat. Bring to a simmer, stirring until smooth.

④ Drain and finely chop sun-dried tomatoes. Stir into pasta, along with sauce and basil. Top with a little freshly ground black pepper, a pinch of salt, and Parmesan, if desired.

PER SERVING 493 calories; 14 g fat (8 g sat.); 23 g protein; 67 g carbohydrate; 3 g fiber; 637 mg sodium; 40 mg cholesterol

CHEESEBURGER MAC & CHEESE

MAKES 8 servings
PREP 10 minutes **COOK** 10 minutes **BAKE** at 350° for 20 minutes **BROIL** 2 minutes

- 1 box (1 pound) elbow macaroni or rotini
- 1 pound ground sirloin
- ½ teaspoon salt
- ¼ teaspoon black pepper
- ¼ cup ketchup
- 2 tablespoons yellow mustard
- 1 tablespoon unsalted butter
- 1 tablespoon all-purpose flour
- 1 can (12 ounces) evaporated milk
- 3 cups shredded cheddar cheese
- 2 medium-size tomatoes, cored and thinly sliced
- 2 tablespoons seasoned bread crumbs

① Heat oven to 350°. Coat a 2-quart oval baking dish with nonstick cooking spray.

② Bring a large pot of lightly salted water to boiling. Add pasta and cook 10 minutes, according to package directions. Drain.

③ While pasta cooks, heat a large nonstick skillet over medium-high heat. Add sirloin, breaking apart with a wooden spoon. Cook 6 minutes, until no longer pink. Season with ¼ teaspoon of the salt and the pepper. Remove from heat and stir in ketchup and mustard. Transfer to a bowl.

④ Return skillet to medium heat and add butter. Once melted, whisk in flour, then add milk in a thin stream. Bring to a simmer and cook 2 minutes. Remove from heat and whisk in remaining ¼ teaspoon salt and 2 cups of the cheese. Stir in pasta. Pour into prepared dish. Top with meat mixture, remaining cheese, sliced tomatoes and bread crumbs. Spritz with nonstick cooking spray.

⑤ Bake at 350° for 20 minutes. Increase heat to broil and broil for 2 minutes.

PER SERVING 554 calories; 23 g fat (13 g sat.); 34 g protein; 53 g carbohydrate; 3 g fiber; 653 mg sodium; 92 mg cholesterol

CHICKEN TACO MAC

MAKES 6 servings
PREP 10 minutes
COOK 21 minutes

- 1 pound boneless chicken breast halves, cut in half horizontally if large
- 1 box (12 ounces) garden radiatore or rotini pasta (such as Ronzoni)
- 1 sweet red pepper, cored and diced (about 1 cup)
- 1 tablespoon unsalted butter
- 1 tablespoon all-purpose flour
- 1½ teaspoons chili powder
- ½ teaspoon salt
- 1¼ cups milk
- 8 ounces pepper-Jack cheese, shredded (about 2 cups)
- 3 scallions, trimmed and sliced
- 1½ cups crushed lime-flavored tortilla chips

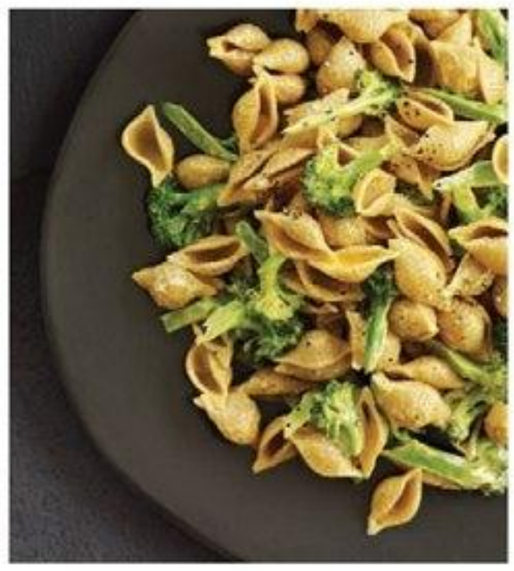
① Bring a large pot of water just to boiling. Add chicken breast and reduce heat to a gentle simmer. Cook chicken in barely simmering water for 12 minutes. Remove to cutting board; return water to boiling; add a little salt to the water.

② Add pasta to boiling water and cook as per package directions, 9 minutes. Add pepper during last minute of cook time. Drain.

③ Meanwhile, melt butter in a medium-size saucepan over medium heat. Whisk in flour, chili powder and salt. Add milk in a thin stream, whisking constantly. Bring to a simmer over medium-high heat; simmer 2 minutes. Remove from heat and whisk in shredded cheese.

④ With two forks or your hands, shred chicken into bite-size pieces. In large bowl, combine pasta and pepper, chicken, scallions and cheese sauce. Stir until blended; top with crushed chips and serve.

PER SERVING 557 calories; 22 g fat (10 g sat.); 35 g protein; 56 g carbohydrate; 5 g fiber; 558 mg sodium; 94 mg cholesterol



BROCCOLI SHELLS & CHEESE

MAKES 6 servings
PREP 10 minutes **COOK** 7 minutes
LET STAND 5 minutes

- 1 box (13.25 ounces) whole-wheat medium pasta shells (such as Barilla)
- ½ pound broccoli florets, cut into bite-size pieces
- 1 cup milk
- 12 slices Kraft Deli Deluxe American cheese (or ½ pound sliced American from deli counter)

① Heat a large pot of lightly salted water to boiling. Add pasta and cook 4 minutes. Stir in broccoli, return to a boil and cook for 3 minutes. Drain.

② Meanwhile, in a small saucepan, heat milk just until bubbles begin to burst at edge of pan. Add cheese slices one by one, whisking until smooth. Simmer 3 minutes.

③ Transfer pasta and broccoli to a large bowl. Add cheese sauce and stir to combine. Let stand 5 minutes before serving.

PER SERVING 447 calories; 20 g fat (11 g sat.); 22 g protein; 49 g carbohydrate; 6 g fiber; 952 mg sodium; 64 mg cholesterol ●

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JONATHAN Mostly red with blushes of green near stem. Both sweet and tart. Good all-purpose cooking apple. Best for pies; halves will hold their shape in slow cooker.

McINTOSH Soft red and green color; sweet, tart, juicy and firm. Best for eating raw, and in salads, applesauce, pies and tarts.

FUJI Soft red, with some yellow near stem. Sweet, juicy and firm. Best for pie filling and tarts, as pieces hold their shape.

CRANBERRY-APPLE CRISP

MAKES 8 servings
PREP 15 minutes
BAKE at 350° for 45 minutes

- **3 Granny Smith apples (unpeeled), cored and cut into 1-inch pieces (about 4 cups)**
- **2 cups whole fresh cranberries**
- **¾ cup sugar**
- **1½ cups old-fashioned oats (not quick-cook)**
- **½ cup packed light-brown sugar**
- **⅓ cup all-purpose flour**
- **½ cup chopped pecans**
- **½ cup (1 stick) unsalted butter, melted**
- **Vanilla ice cream (optional)**

① Heat oven to 350°. Butter a 2-quart baking dish.

② In a large bowl, mix together apples, cranberries and sugar. Spoon into prepared baking dish.

③ In same bowl, mix together oats, brown sugar, flour and pecans. Stir in melted butter.

④ Sprinkle oatmeal mixture evenly over the top of the apples. Bake at 350° for 45 minutes, until bubbly and apples are tender. Serve warm or cold with a scoop of ice cream, if desired.

PER SERVING 389 calories; 18 g fat (8 g sat.); 4 g protein; 58 g carbohydrate; 5 g fiber; 10 mg sodium; 30 mg cholesterol

CARAMEL-SPICED APPLES

MAKES 10 servings
PREP 20 minutes
SLOW COOK 3 hours on LOW

- **1 teaspoon ground cinnamon**
- **⅛ teaspoon ground cloves**
- **5 medium red-skinned cooking apples (such as Rome or Jonathan), cored, and halved**
- **½ cup apple juice or apple cider**
- **1 tablespoon lemon juice**
- **⅔ cup sugar-free caramel ice cream topping**
- **½ cup toasted, chopped pecans**

① In small bowl, combine cinnamon and cloves. Place half of the apple halves in a 4-quart slow cooker. Sprinkle evenly with half of the cinnamon mixture. Add remaining apples and sprinkle with remaining cinnamon mixture. Pour apple juice and lemon juice over apples. Stir to coat apples evenly.

② Cover and cook on LOW for 2½ to 3 hours, stirring gently halfway through cooking time. Spoon apples and cooking liquid into individual serving dishes. Drizzle with caramel topping and sprinkle with pecans.

PER SERVING 128 calories; 4 g fat (0 g sat.); 1 g protein; 25 g carbohydrate; 2 g fiber; 33 mg sodium; 0 mg cholesterol

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Food styling: Karen Tack. Prop styling: Christina Lane.

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SSERTS

from our favorite apple treats.

SINGLE-CRUST APPLE BAKE

MAKES 6 servings **PREP** 30 minutes
BAKE at 400° for 20 minutes

- ½ of a 15-ounce package rolled refrigerated piecrust (1 crust)
- 6 small Jonathan apples (2½ to 3 ounces each), cored and quartered
- 2 tablespoons lemon juice
- 2 tablespoons honey
- 4 teaspoons finely chopped crystallized ginger
- Coarsely ground black pepper
- 2 tablespoons milk
- 1 tablespoon sugar
- Whipped cream (optional)

① Let piecrust stand at room temperature 15 minutes. Heat oven to 400°. Arrange apple quarters in six 6-ounce custard cups. In a small bowl, stir together lemon juice, honey and ginger. Drizzle over apples. Sprinkle lightly with coarsely ground pepper; set aside.

② Unroll piecrust. Brush lightly with milk. Sprinkle sugar evenly over piecrust. Cut into 12 wedges. Drape 2 pastry wedges over apples in each cup, allowing corners to hang over edge of cup. Place cups in a 15 x 10 x 1-inch baking pan. Bake for 20 minutes or until crust is golden brown. Serve warm with whipped cream, if desired.

PER SERVING 285 calories; 10 g fat (4 g sat.); 1 g protein; 51 g carbohydrate; 5 g fiber; 135 mg sodium; 7 mg cholesterol

GINGER-APPLE TART

MAKES 12 servings **PREP** 25 minutes
BAKE at 400° for 25 minutes

- 1 egg, lightly beaten
- ½ of a 17.3-ounce package frozen puff pastry sheets (1 sheet), thawed
- 2 tablespoons coarse or granulated sugar
- 2 tablespoons finely chopped crystallized ginger
- 2 small baking apples, cored, halved and thinly sliced

① Heat oven to 400°. In a small bowl, combine egg and **1 tablespoon water**; set aside. Line a large baking sheet with parchment paper; set aside. Unfold pastry onto a lightly floured surface. Roll into a 12-inch square. Using a pizza cutter, cut a ½-inch strip from each side of the square. Brush edges of pastry square with egg wash. Transfer pastry to prepared baking sheet. Attach a pastry strip to each side of square to form an edge; brush with egg mixture. Prick pastry with a fork.

② In small bowl, stir together sugar and ginger. Arrange apple slices over pastry, overlapping. Sprinkle with sugar mixture.

③ Bake at 400° for 20 to 25 minutes or until pastry is deep golden brown and crisp. Cool on baking sheet on a wire rack.

PER SERVING 120 calories; 7 g fat (0 g sat.); 1 g protein; 14 g carbohydrate; 1 g fiber; 83 mg sodium; 18 mg cholesterol

CARAMELIZED APPLE CAKE

MAKES 10 servings
PREP 10 minutes
COOK 12 minutes
BAKE at 375° for 30 minutes

- 1½ cups flour
- 1½ teaspoons baking powder
- ½ teaspoon salt
- ½ cup (1 stick) plus 5 tablespoons unsalted butter, softened
- ⅔ cup granulated sugar
- 2 eggs
- 1 teaspoon vanilla extract
- ½ cup sour cream
- ½ cup packed dark-brown sugar
- 2 large Granny Smith apples, peeled, cored, cut into ¼-inch slices

① Heat oven to 375°.

② Mix flour, baking powder and salt in a medium-size bowl; set aside. Using an electric mixer on high speed, beat ½ cup of the butter in a large bowl for 1 minute or until creamy. Add granulated sugar and continue to beat until light and fluffy.

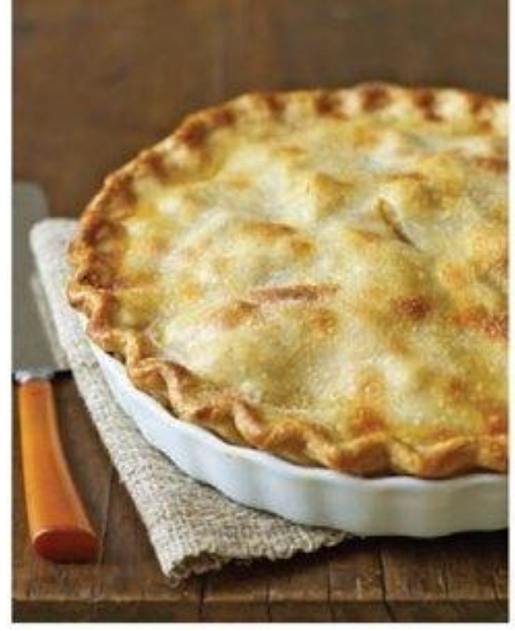
③ Add eggs and vanilla, and beat until blended. Reduce speed to low. Gradually blend in flour mixture, then sour cream.

④ Melt remaining 5 tablespoons butter in an ovenproof 10-inch nonstick skillet. Add brown sugar; stir 2 minutes.

⑤ Add apple slices to the pan and reduce heat to medium-low. Cook for about 10 minutes or until tender. Let cool for 5 minutes.

⑥ Spoon batter over apples and spread to edge of pan. Bake at 375° for 30 minutes or until golden brown. Cool on rack for 20 minutes. Run knife around edge. Carefully invert onto a plate.

PER SERVING 345 calories; 19 g fat (11 g sat.); 4 g protein; 42 g carbohydrate; 1 g fiber; 119 mg sodium; 88 mg cholesterol



CLASSIC APPLE PIE

MAKES 10 servings **PREP** 30 minutes **COOK** 10 minutes **BAKE** at 400° for 20 minutes, then at 350° for 25 minutes

- 1 15-ounce package rolled refrigerated piecrust (2 crusts)
- ½ cup plus 1 teaspoon granulated sugar
- ½ cup packed brown sugar
- 3 tablespoons cornstarch
- ½ teaspoon ground cinnamon
- ¼ teaspoon salt
- Pinch ground cloves
- 2 pounds Granny Smith apples, peeled and cored
- 2 pounds Fuji apples, peeled and cored
- 2 tablespoons unsalted butter
- 2 tablespoons lemon juice
- 1 large egg, beaten with 1 tablespoon water

① Heat oven to 400°. Unroll one piecrust onto a work surface. Roll out to 12-inch circle. Fit into bottom and up side of a 9-inch deep-dish pie plate. Prick bottom of crust with a fork; refrigerate.

② In small bowl, blend ½ cup of the granulated sugar, the brown sugar, cornstarch, cinnamon, salt and cloves.

③ Cut apples into ½-inch pieces. Melt butter in a large skillet over medium heat. Add apples, lemon juice and sugar mixture. Cook 10 minutes, stirring, until pan juices thicken. Set aside to cool.

④ Pour cooled apple mixture into crust. Unroll second crust and roll out to 12-inch circle. Cut vent hole in center of dough. Transfer to pie, centering over filling. Crimp edge together.

⑤ Brush pie with egg mixture; sprinkle with remaining teaspoon granulated sugar. Bake at 400° for 20 minutes, then at 350° for 25 minutes. Cover pie with foil if it browns too quickly. Cool at least 1 hour before slicing and serving.

PER SERVING 395 calories; 14 g fat (6 g sat.); 2 g protein; 68 g carbohydrate; 4 g fiber; 228 mg sodium; 25 mg cholesterol ●

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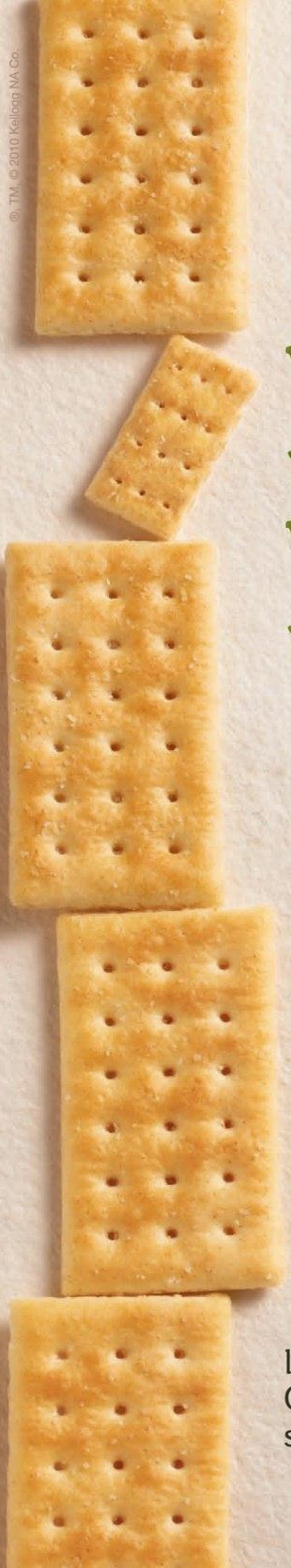

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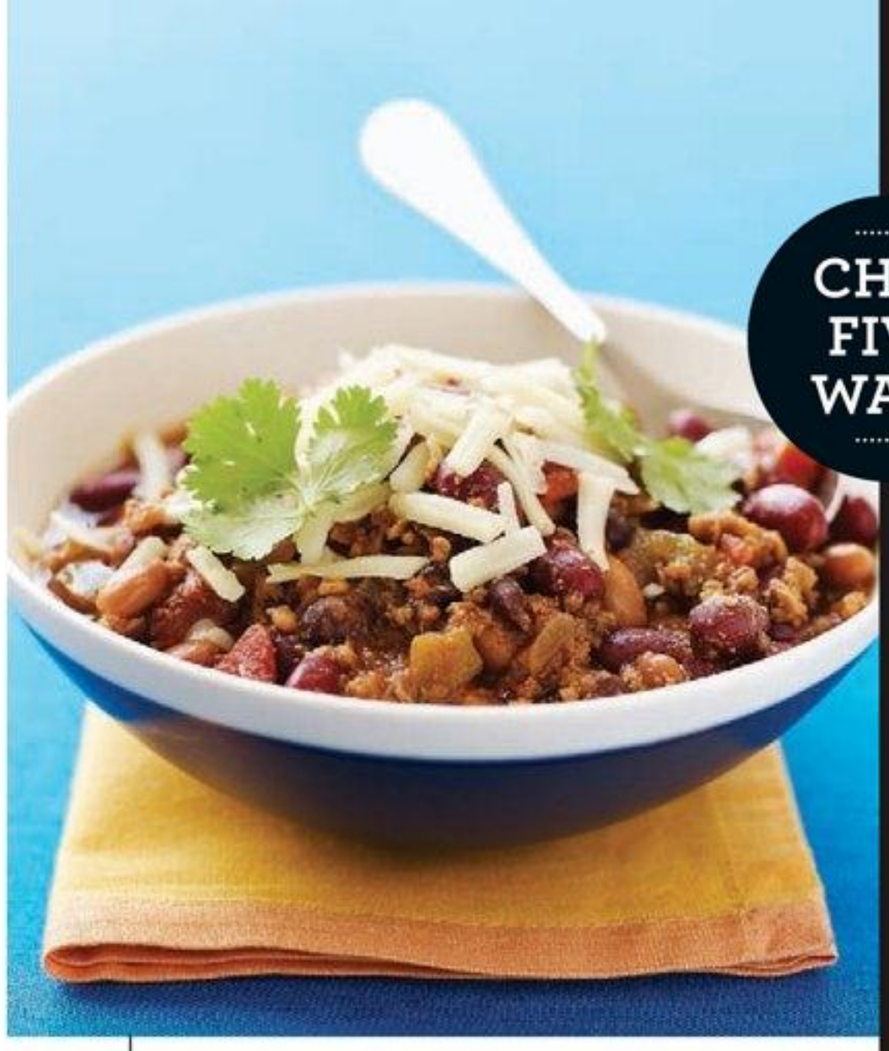
→ BY CINDY HELLER



3-BEAN CHILI

MAKES 8 servings
SOAK overnight
PREP 10 minutes
SLOW COOK 7½ hours on LOW

- 1 cup (about 6 ounces) dried black beans, picked over
- 1 cup (about 6 ounces) dried pinto beans, picked over
- 6 cups (about 6 ounces) dried kidney beans, picked over
- 1 bay leaf
- 2 tablespoons ancho chile powder
- 1 tablespoon ground cumin
- 1 teaspoon oregano
- 1 medium-size onion, chopped
- 1 medium-size green pepper, seeded and chopped
- 3 garlic cloves, minced
- 1 can (14.5 ounces) diced tomatoes, drained
- 1 package (12 ounces) soy crumbles (such as Smart Ground)
- ¼ cup ketchup
- ¼ cup cornmeal
- 1 teaspoon salt
- ½ teaspoon black pepper
- Monterey Jack cheese and cilantro for garnish (optional)

① Soak beans overnight. Drain beans and place in slow cooker bowl. Add the bay leaf and 2 teaspoons chile powder and cover with **5 cups water.** Cover; cook on LOW for 7 hours or until beans are tender.

② Stir in remaining 1 tablespoon plus 1 teaspoon chile powder, cumin, oregano, onion, green pepper, garlic, tomatoes, soy crumbles, ketchup, cornmeal, salt and pepper; cook an additional 30 minutes.

③ Top with cheese and cilantro, if desired.

PER SERVING 349 calories; 2 g fat (0 g sat.); 26 g protein; 57 g carbohydrate; 18 g fiber; 902 mg sodium; 0 mg cholesterol

» For more delicious slow cooker recipes, go to **familycircle.com/slowcooker.**

WHITE TURKEY CHILI

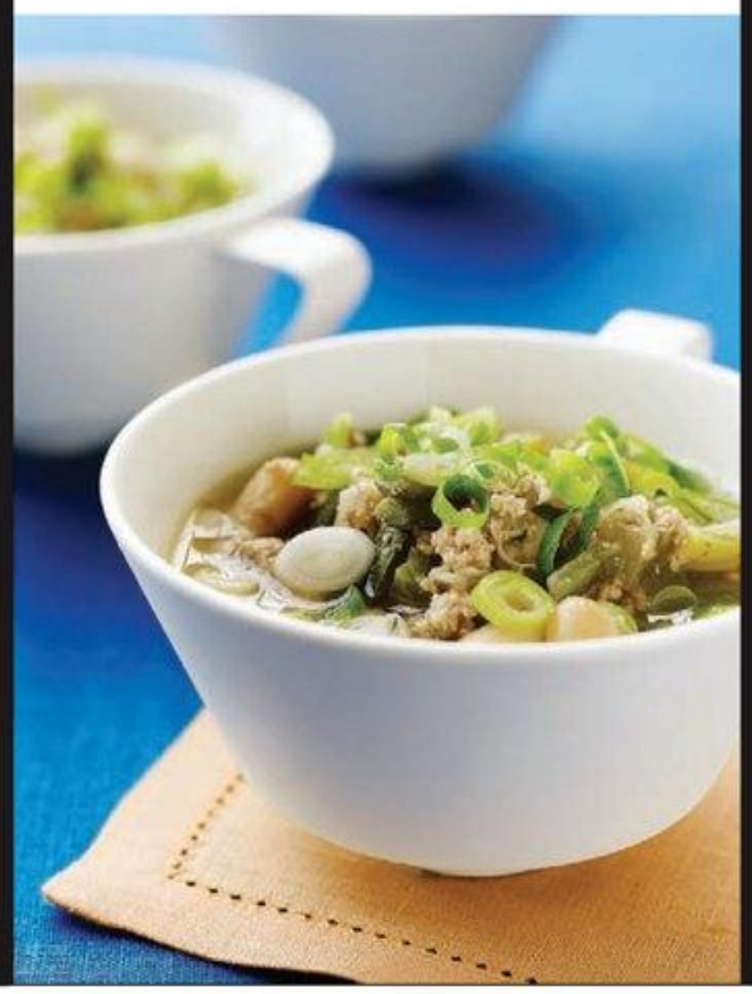
MAKES 6 servings
PREP 10 minutes
SLOW COOK 4 hours on HIGH or 6 hours on LOW

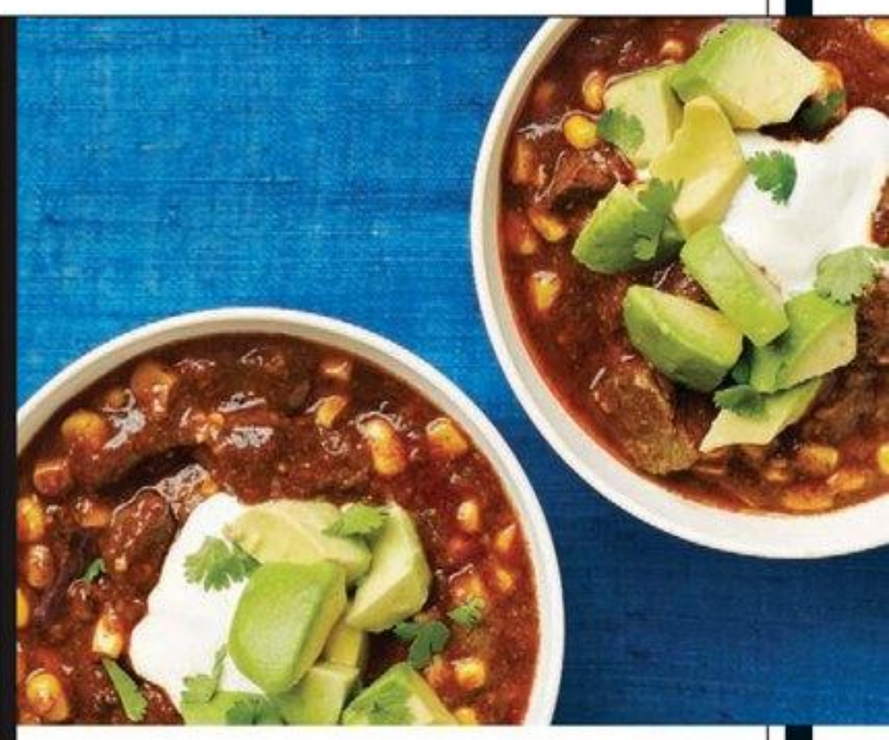
- 2 cans (15.5 ounces each) small white beans, drained and rinsed
- 1 package (20.8 ounces) ground turkey breast
- 2 jalapeño peppers, seeded and minced
- 2 green peppers, seeded and chopped
- 1 poblano pepper, seeded and chopped
- 1 large onion, chopped
- 4 garlic cloves, minced
- 2½ teaspoons ground cumin
- ¾ teaspoon ground coriander
- 2 cups low-sodium chicken broth
- 3 tablespoons fresh lime juice
- ¼ cup chopped cilantro
- ½ teaspoon salt
- 4 scallions, thinly sliced

① Set aside 1 cup of the beans. Combine remaining beans, turkey, jalapeños, green peppers, poblano, onion, garlic, 2 teaspoons cumin, ½ teaspoon coriander and broth in slow cooker. Cover and cook on HIGH for 4 hours or LOW for 6 hours, stirring once halfway through.

② Mash reserved beans. Stir in mashed beans, ½ teaspoon cumin, ¼ teaspoon coriander, lime juice, cilantro and salt. Sprinkle with scallions and serve immediately.

PER SERVING 241 calories; 2 g fat (0 g sat.); 35 g protein; 31 g carbohydrate; 9 g fiber; 581 mg sodium; 41 mg cholesterol





CHILI CON CARNE

MAKES 6 servings
PREP 10 minutes **COOK** 11 minutes
SLOW COOK 4 hours on HIGH or 6 hours on LOW

- 1 tablespoon plus 1 teaspoon olive oil
- 2 pounds boneless beef round steak, trimmed and cut into ½-inch cubes
- 3 cloves garlic, minced
- 1 large onion, finely chopped
- 3 tablespoons plus 1 teaspoon chili powder
- 3½ teaspoons ground cumin
- 1 teaspoon salt
- ½ teaspoon cayenne pepper
- 1 package (10 ounces) frozen corn
- 3 tablespoons finely ground cornmeal
- Sour cream, sliced avocado and cilantro for garnish (optional)

① Heat 1 tablespoon of the oil in a large nonstick skillet over medium-high heat. Add beef to skillet and cook, stirring occasionally, for 8 minutes, draining any accumulated fat. Remove beef to slow cooker; reduce heat to medium. Add 1 teaspoon oil to skillet; add garlic and onion and cook, stirring, for 2 minutes. Stir in 3 tablespoons chili powder, 2 teaspoons cumin, ½ teaspoon salt and ¼ teaspoon cayenne; cook 1 minute, stirring constantly.

② Scrape skillet contents into slow cooker and add corn and **3¾ cups water** (enough to cover by 1 inch). Cover and cook on HIGH for 4 hours or on LOW for 6 hours.

③ When there is 1 hour cook time remaining, stir together corn meal and **3 tablespoons water**. Stir in cornmeal paste, remaining 1 teaspoon chili powder, 1½ teaspoons cumin, ½ teaspoon salt and ¼ teaspoon cayenne; cook for 1 more hour or until thickened. Garnish with sour cream, avocado and cilantro, if desired.

PER SERVING 374 calories; 17 g fat (5 g sat.); 36 g protein; 21 g carbohydrate; 4 g fiber; 536 mg sodium; 60 mg cholesterol

Food styling: Sara Neumeier. Prop styling: Lynda White.

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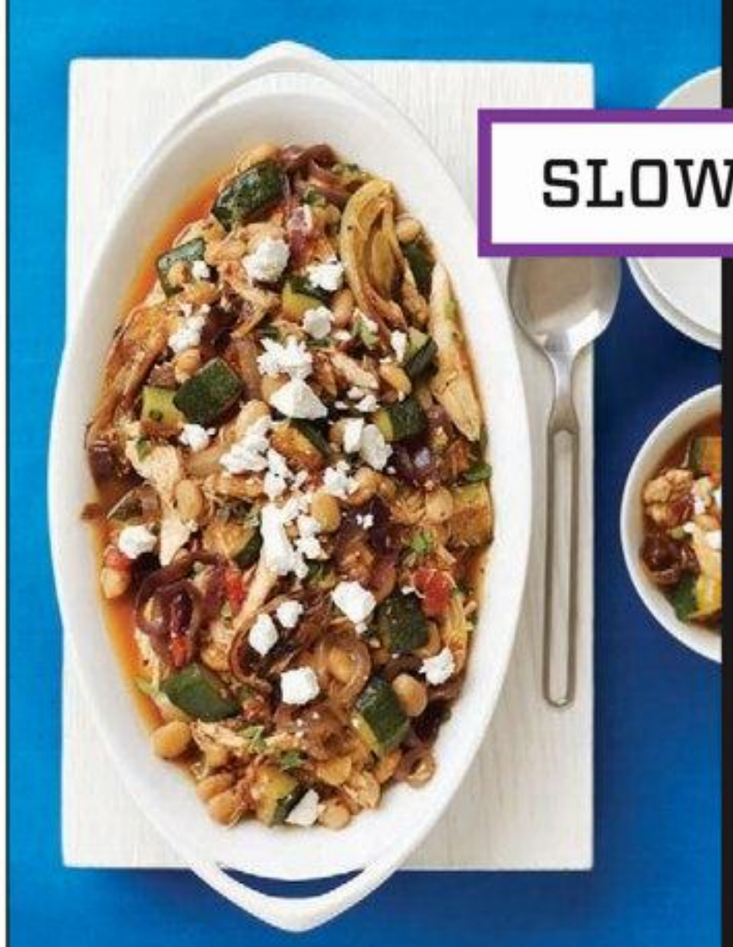


MEDITERRANEAN ROASTED VEGETABLE & CHICKEN CHILI

MAKES 6 servings
PREP 10 minutes
SLOW COOK 4 hours 15 minutes on HIGH or 6 hours 15 minutes on LOW
ROAST at 425° for 35 minutes

- 2 pounds bone-in chicken breasts, skin removed
- 2 cans (15.5 ounces each) Great Northern beans, drained and rinsed
- 1 can (14.5 ounces) diced tomatoes, drained
- 3 tablespoons Greek seasoning
- 2 teaspoons paprika
- 1 cup low-sodium chicken broth
- 2 zucchinis, cut into ½-inch pieces
- 1 red onion, thinly sliced
- 1 fennel bulb, trimmed, cored and sliced
- 3 cloves garlic, minced
- 2 tablespoons olive oil
- 2 tablespoons lemon juice
- 1 tablespoon chopped fresh oregano
- 1 teaspoon lemon zest
- ¼ teaspoon salt
- ⅓ cup crumbled feta cheese (optional)

① Combine chicken, beans, tomatoes, 2 tablespoons of the Greek seasoning and 1 teaspoon of the paprika in slow cooker; add broth and **1 cup water**. Cover; cook on HIGH for 4 hours or LOW for 6 hours.

② When there is 1 hour cook time remaining, heat oven to 425°. In a large roasting pan, toss together 2 teaspoons of the Greek seasoning, 1 teaspoon paprika, zucchinis, onion, fennel, garlic and olive oil. Roast at 425° for 35 minutes, stirring twice. Stir in lemon juice, oregano and zest.

③ Remove chicken; shred into bite-size pieces. Discard bones and stir chicken back into slow cooker. Stir in vegetables, remaining 1 teaspoon Greek seasoning and salt; cook an additional 15 minutes. Sprinkle with feta cheese, if desired.

PER SERVING 300 calories; 6 g fat (1 g sat.); 37 g protein; 29 g carbohydrate; 9 g fiber; 619 mg sodium; 71 mg cholesterol

ALL-AMERICAN CHILI

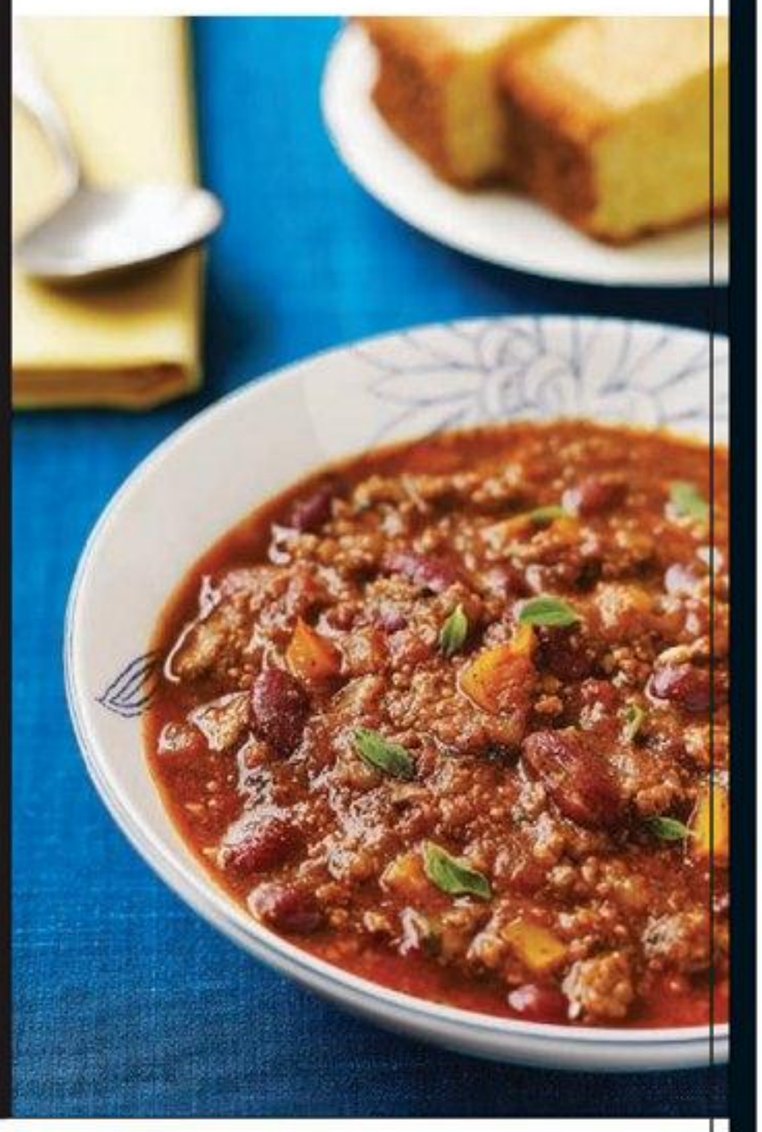
MAKES 6 servings
PREP 10 minutes
SLOW COOK 4 hours on HIGH or 6 hours on LOW

- 1½ pounds lean ground beef
- 2 onions, chopped
- 1 yellow bell pepper, seeded and chopped
- 2 garlic cloves, minced
- 2 cans (15.5 ounces each) kidney beans, rinsed and drained
- 1 can (14.5 ounces) diced tomatoes, drained
- 1 can (8 ounces) no-salt-added tomato sauce
- 1 cup low-sodium chicken broth
- 3 tablespoons chili powder
- 1 teaspoon ground cumin
- 1 teaspoon dried oregano
- ½ teaspoon salt
- 1 box (8.5 ounces) corn bread mix, prepared according to package directions (optional)

① Combine beef, onions, pepper, garlic, beans, tomatoes, tomato sauce, broth, 2 tablespoons of the chili powder, and ½ teaspoon *each* of the cumin and the oregano in slow cooker. Cover and cook on HIGH for 4 hours or LOW for 6 hours.

② Remove cover and stir in remaining 1 tablespoon chili powder, ½ teaspoon *each* cumin and oregano, and salt. Serve with corn bread, if desired.

PER SERVING 353 calories; 7 g fat (3 g sat.); 35 g protein; 37 g carbohydrate; 13 g fiber; 710 mg sodium; 71 mg cholesterol ●



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BUYER'S GUIDE

•home

HOME NEWS

Page 24: Mercury Glass Lithograph apothecary jar ($110/5), Skeleton fireplace matches ($8.50/each), **Two's Company,** 800-896-7266 for stores.

TRICK OR TREAT

Page 26: Assorted fabrics, **EQuilter,** equilter.com. PeelnStick double-sided adhesive sheets, **Therm O Web,** from $3, createforless.com. Micro-Tip scissors, **Fiskars,** $10.50, createforless.com. 3-in-1 craft glue, **Beacon,** available at craft stores. Assorted black and white candy, **Bulk Candy Store,** bulkcandystore.com.
Page 27: Artificial flowers, styrofoam wreath form, foam glue, available at craft stores. Matte finish floral spray, **Design Master,** dm.com for info. Satin Finish spray paint, **Krylon,** krylon.com for info.
Page 28: Wool felt, **Weir Crafts,** weircrafts.com for info. Black rickrack, **Dove Originals Trims,** doveoriginalstrims.com for info. Fabri-Tac glue ($5.20), Micro-Tip Scissors ($10.50), **Beacon,** createforless.com.
Page 29: Inkjet compatible vellum paper, Dick Blick, $13, dickblick.com. Parisian decorative edge punch, EK Success, $13, scrapbook.com.
Page 30: Assorted black frames, **Michaels stores.** Inkjet compatible vellum paper, **Dick Blick,** $13, dickblick.com.
Page 32: Peacock heavyweight construction paper (**Pacon,** $2/50 sheets), Micro-Tip scissors (**Fiskars,** $10.50), both createforless.com.

Clipart Resources

graphicsfairy.blogspot.com; thevintageworkshop.com; clipart.com; pdclipart.org; *The Clip Art Book: A Compilation of More than 5,000 Illustrations and Designs* (Gramercy); *Old-Time Anatomical Illustrations* CD-Rom and Book (Dover); *Insects* CD-Rom and Book (Dover).

•style

STYLE NEWS

Page 51: Sweater, Apt 9., $44, Kohl's stores. Shirt, Talbots, $69.50, Talbots stores. Skirt, Alfani, $59, Macy's stores and macys.com. Hat, Christys' Crown Series, $66, christyshats.com. Scarf, Echo, $38, echodesign.com. Leopard belt, Ann Taylor, $48, anntaylor.com. Studded belt, J.Crew, $55, jcrew.com. Skinny bracelets ($28), medium bracelets ($48), thick snap bracelets ($50), Swarovski, swarovski-crystallized.com.

Page 52: Come Slither: Skova Design, $50, 818-789-4021 or bellegray.com. Kenneth Jay Lane for Avon, $30, avon.com. Nashelle, $90, nashelle.com. The Eyes Have It: Wanderlove, $17, Duane Reade or wanderlovebeauty.com. Talk Is Chic: Dressbarn, $40, dressbarn.com. H&M, $99, H&M stores. Alfani, $59, Macy's stores and macys.com.

THINK PINK

Page 54: Estée Lauder, $25, Estée Lauder counters and esteelauder.com. Sephora, $15, Sephora stores and sephora.com. Shiseido, $22, sephora.com. Beegee, $82, beegeebags.com. TOCS, $50, tocswatches.com. Pink Pony Collection by Ralph Lauren, $10, ralphlauren.com. OPI, $8.50, Ulta. Fergie, $45, qvc.com or 800-345-1515 starting October 15, 2010. Dyanne Belle, $110, dyannebelle.com. Ford Warriors in Pink, $29, fordcares.com.

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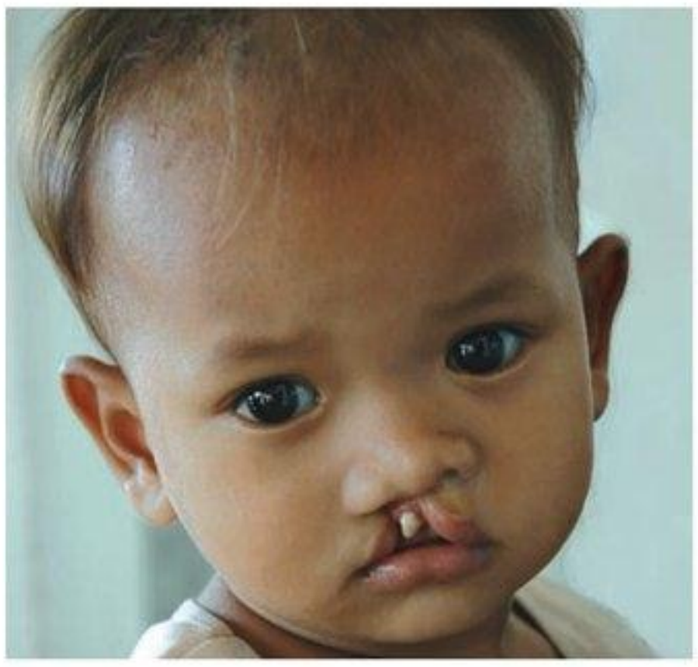
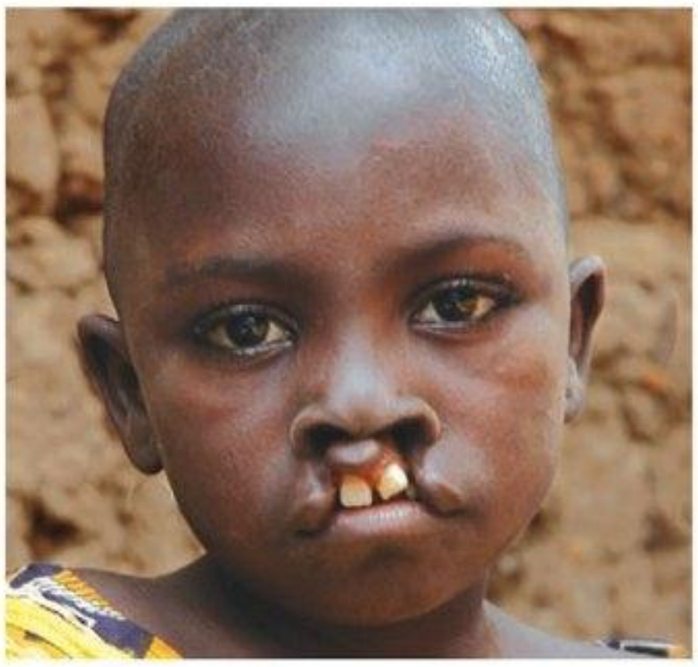
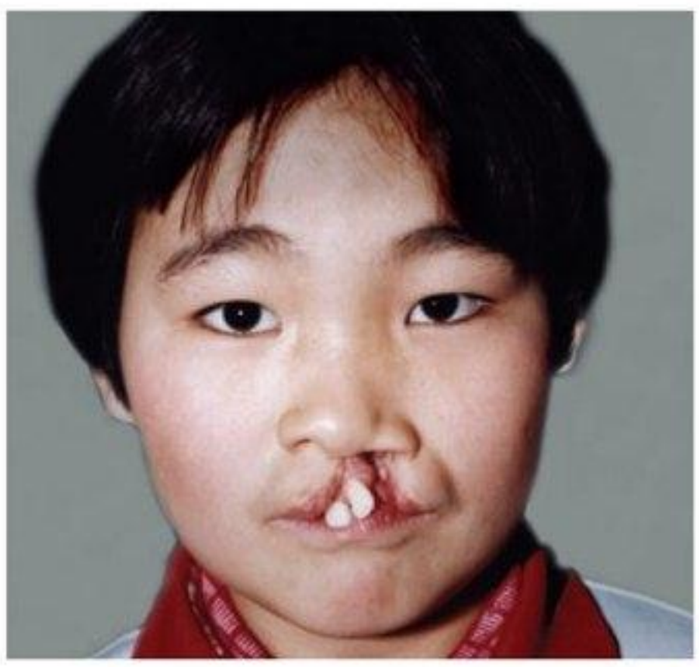
How Often Do You Get The Chance To Save A Child's Life For $250?

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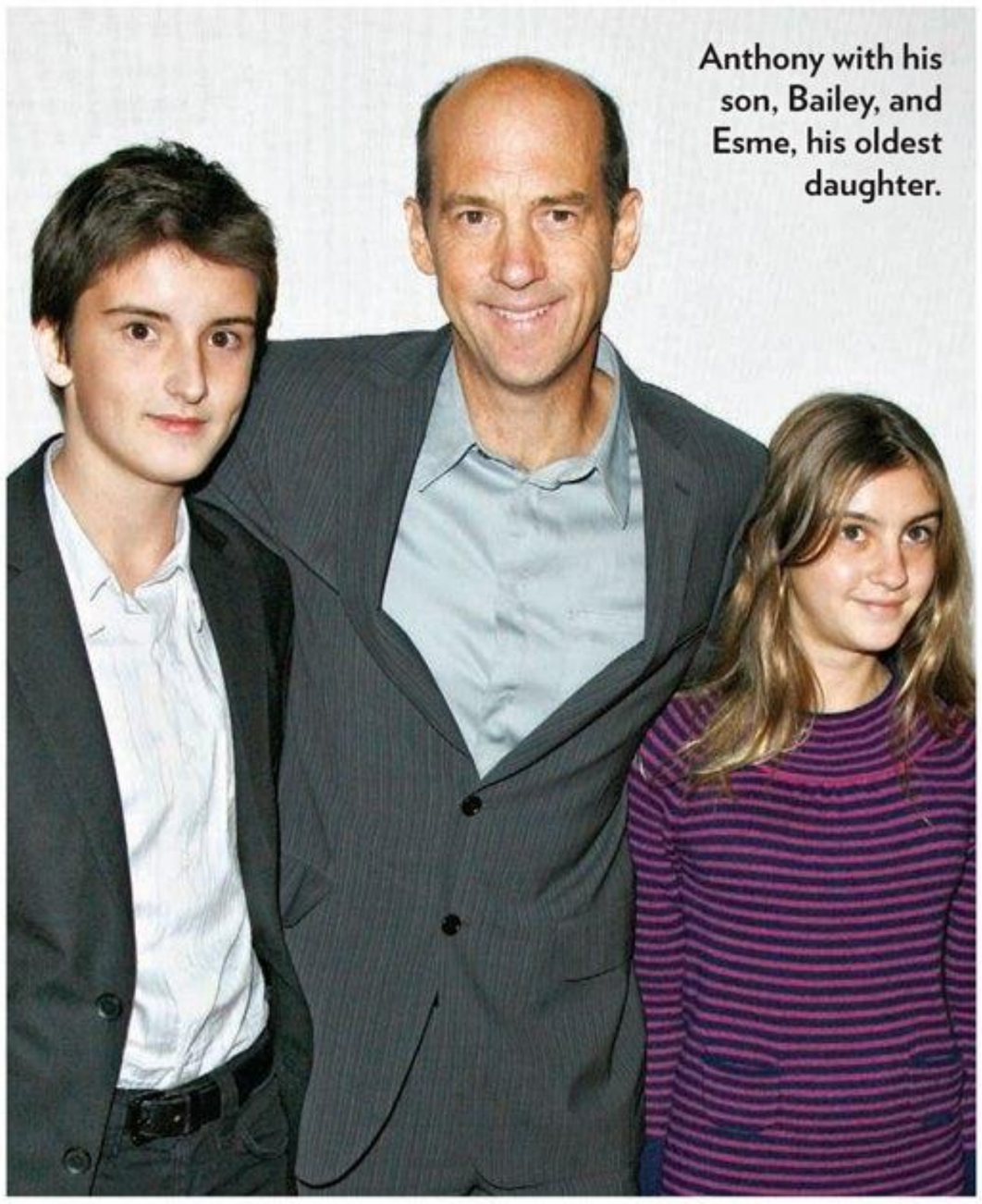
my family life

→ BY PATTY A . MARTINEZ



Anthony with his son, Bailey, and Esme, his oldest daughter.

Anthony Edwards

Although he plays a quick-tempered dad in the new movie *Flipped,* 48-year-old Anthony Edwards is calm and cool at home in New York City with his wife, Jeanine; son Bailey, 16; and daughters Esme, 13; Wallis, 10; and Poppy, 8.

In *Flipped,* an adaptation of Wendelin Van Draanen's young adult novel, your character, Mr. Loski, is a judgmental dad. Was it hard to relate to him? The movie helped me realize that even well-intentioned parents can still mess up their kids! There isn't a lot of gray area with Loski—it's all black or white.

Do you consider yourself a hands-on father? I definitely spend a lot of time with my kids. That was the choice I made in leaving *ER*—and Hollywood. I wanted to participate more in their lives.

How did you meet your wife, Jeanine? She was a makeup artist on the set of *Pet Sematary Two* in 1992. I sat in her chair, she cast a spell and that was it—done for life. Jeanine can help just about anyone with any problem. She takes care of a lot of people, and I'm lucky to be in that circle.

What's hardest about parenthood? Watching my kids go through puberty. They feel awkward, lost, lonely and not part of the group. Or one minute they're popular, and the next, not so popular. It makes me feel inadequate as a parent, but it's part of life.

You mean the kids actually talk to you about those things? They do! Well, okay—their mom is better. But dads have to find a way to discuss tough topics, even when we don't agree with what our kids are doing. It can be frustrating when your teenager gives attitude. You actually think, "I don't want to talk to this person." But you have to because you love him and communicating is the only way to work through it.

Do the kids think it's cool that you're an actor? Nah. When I showed them an old trailer for *Gotcha* [1985] they were rolling on the floor laughing at my hair. They weren't interested in the movie because I was so ridiculous looking. My daughters just wish I'd work with Robert Pattinson!

"I didn't realize fatherhood would require so much growing up on my part. You have to be more patient, understanding and giving than ever before."

facts of life

best known for

Playing Dr. Mark Greene for eight years on the hit drama *ER*. But he's also appeared in film classics like *Top Gun* and *Fast Times at Ridgemont High*.

my kids hate it, but i like to ...

"Embarrass them by telling bad jokes in front of their friends. It makes them squirm."

me time

"I run for an hour, three or four times a week. In 2009 I ran the New York Marathon to raise money and awareness for Shoe4Africa, which is building a children's hospital in Kenya."

perfect saturday

"No one has to get out of bed until he's ready. We make crepes or pancakes, then head out to do something fun. Weekends are a break from school for parents too—packing up four kids every day is no easy feat!"

if i weren't an actor

"I would be a race car driver. My guilty pleasure is watching Formula One racing, and years back I was the pace car driver at the Indy 500."

i try not to ...

"Barter with my kids or reward them for something they should be doing anyway."

Photo: John Spellman/Retna Ltd./Corbis.

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